CalWORKs Program Guide Special Notice 06-14

Food Stamps Program Guide Special Notice 06-14

Medi-Cal Program Guide Special Notice 06-10

June 8, 2006

Subject

Processing Medi-Cal Eligibility Data System (MEDS) Alerts and Income Eligibility Verification System (IEVS) in CalWIN and utilizing MEDS Transaction Viewer for CalWIN

Effective Date

Upon receipt

Reference

CalWORKs Program Guide 40-100 and Special Notice 05-18 Food Stamps Program Guide 63-117 and Special Notice 05-18 Medi-Cal Program Guide 16-1 and Special Notice 05-09

Purpose

The purpose of this joint Special Notice is to:

- inform staff that hard copies of IEVS reports and MEDS critical and priority alerts shall continue to be printed and distributed for approximately 180 days after CalWIN implementation.
- provide staff with important reminders regarding the requirements to process IEVS reports and MEDS critical and priority alerts timely and in accordance with program regulations.
- provide staff with written instructions for utilizing the MEDS Transaction Viewer for CalWIN.
- include CalWIN resource guides currently available to assist staff with processing MEDS alerts and IEVS reports in CalWIN.

Printing of MEDS alerts and IEVS reports

With CalWIN implementation, mainframe batch print jobs, which included IEVS reports and MEDS alerts, will no longer be run. Although all IEVS reports and MEDS alerts will be posted online to CalWIN, hard copy IEVS reports and MEDS critical and priority alerts shall continue to be printed and distributed to staff for approximately 180 days after conversion in an effort to ease the transition to CalWIN and assist staff in ensuring that critical information is processed timely.

In order to continue printing hard copies of IEVS reports and MEDS alerts, each Family Resource Center has identified a LAN printer that will be used for this printing. Local printing of IEVS reports and MEDS alerts is scheduled daily for distribution to workers. Designated print staff are asked to monitor the print jobs, and report any problems immediately according to the attached instruction (Attachment A).

Important Reminders

MEDS Critical and Priority alerts

As part of the MEDS performance standards set forth by the Department of Health Services, staff are still required to process and resolve 95% of the 14 critical error alerts and 90% of the 43 priority alerts timely.

To be considered "timely," alerts received on or before the 10th working day of the month must be processed by MEDS cutoff in time for change to be effective the beginning of the following month. Alerts received after the 10th working day of the month must be processed by MEDS cutoff of the following month in time for the change to be effective the beginning of the month after the following month.

IEVS Reports

Staff shall continue to review and process IEVS reports as required by program regulations. Below are summaries of the IEVS requirements for CalWORKs, Food Stamps and Medi-Cal Program.

Program	Requirements
CalWORKs	All applicant/recipient abstract data must be reviewed and compared to the case record to ensure the information applies to the applicant/recipient. The IEVS information is then compared to the information provided by the applicant/recipient. Any information that is significantly different from the information provided by the applicant/recipient must be clarified. "Significantly different" means the difference could affect current or prior eligibility or benefit level.
	Information received before the interview - Discrepancies will be discussed and resolved during the interview if possible. A third party contact may be necessary. Resolution of the discrepancies must be thoroughly documented in the case narrative.
	• Information received after the interview - The worker will contact the applicant/recipient and request clarification. The worker must explain to the client what information the County has, how it affects the applicant/recipient's eligibility and what action will occur if the applicant/recipient does not respond. The applicant/recipient will be given 10 days to respond to the request for IEVS clarification. If the applicant/recipient requests an extension of time to obtain the information, the worker will allow a reasonable extension. Applicant/Recipients should be denied or discontinued if the worker is able to determine without further inquiry that the applicant/recipient is ineligible.

Important Reminders (continued)

IEVS Reports (conti.)

Program	Requirements
Food Stamps	IEVS Applicant data will be used to the extent possible in the initial eligibility determination process. However, granting will not be delayed pending receipt of IEVS information if other information establishes eligibility. If IEVS information is not available prior to granting, it must be reviewed when it is received. If it has an impact on eligibility or benefit levels, appropriate case action must be taken.
	When the IEVS Abstract is received prior to granting the case, the information contained in the abstract will be used to the extent possible in the eligibility determination process. When it is received after the case has been granted, it will be used to validate eligibility and benefit levels.
	Any information that is "significantly different" from applicant supplied information must be clarified. Significantly different means that the difference could impact current or prior eligibility and/or benefit levels.
	If discrepant information is found on the PVS abstract and the information obtained impacted the grant, issuance amount, or eligibility, staff are reminded to follow the instructions in the joint CW/FS Special Notice 05-14/05-18 to submit the response form DPS-526 to the Fraud Bureau.
Medi-Cal	 Upon receipt of an IEVS report, the worker shall review the information in the report to ensure that correct case data was submitted to IEVS. compare the IEVS information against information contained in the case record to determine whether it is applicable to the applicant/recipient or whether the information has an affect on eligibility or benefit level. obtain clarification from applicant for any information that is "significantly different" from application supplied information.
	Significant different means that the difference between the applicant supplied information and IEVS match results could impact current or prior eligibility, or share-of-cost.

Important Reminders (continued)

IEVS Reports (conti.)

Program	Requirements
Medi-Cal	Whenever possible, such discrepancies should be discussed at the application interview and resolved before granting. When information is received after the application interview, the worker must contact the applicant immediately, inform him/her of the IEVS information which is significantly different from current or prior application information and request clarification.

Required Action

Workers still have the responsibilities of ensuring that:

- MEDS critical and priority alerts are processed in accordance with the MEDS performance standards set forth in CalWORKS SN 05-18 and Medi-Cal SN 05-09.
- IEVS reports are reviewed and processed timely, as required by program regulations.

Available **CalWIN** Resources

There are several documents currently available to assist staff with processing MEDS alerts and IEVS reports in CalWIN. Included with this Special Notice are:

Title	Descriptions
Income Eligibility	Supplemental training developed by EDS for
Verification	retrieving IEVS reports via the IEVS Interface
System *	windows and resolving IEVS alerts in CalWIN
	(Attachment B).
Request/View	San Diego County How To # 137 for viewing IEVS
IEVS/SAVE *	Applicant reports in CalWIN (Attachment C).
Processing	Desk Guide originally developed by Sonoma
MEDS alerts in	County for Viewing MEDS alerts in CalWIN and
CalWIN	resolving CalWIN case alerts related to MEDS
	(Attachment D).
MEDS	San Diego County user instructions for a web-
Transaction	based online viewing of MEDS transactions
Viewer	generated from CalWIN to MEDS (Attachment E.)

Titles identified with an asterisk are also accessible via the CalWIN intranet website, http://cosda428/calwin/. Staff are advised to access the CalWIN intranet website for updates and/or changes.

Automation
Impact

None.

Forms Impact None.

Quality Assurance Impact

Quality Assurance will continue to cite with the appropriate error any case that does not follow the requirements of this SN and as stated in CalWORKs Program Guide 40-100 and Special Notice 05-18, Food Stamps Program Guide 63-117 and Special Notice 05-18, Medi-Cal Program Guide 16-1 and Special Notice 05-09

Manager Approval

ORIGINAL SIGNED BY:

VICKI MIZEL, ASSISTANT DEPUTY DIRECTOR

Medical Care Program Administration Strategic Planning and Operational Support

AND

KIM FORRESTER, ASSISTANT DEPUTY DIRECTOR, for

Self-Sufficiency Programs Strategic Planning and Operational Support

ΚT

PRINTING OF MEDS ALERT & IEVS REPORTS County of San Diego Local CalWIN Solution

Effective Date	June 5, 2006
Expiration Date	Approximately 180 days after conversion
Background	Mainframe batch print jobs, which include IEVS reports and MEDS alerts, will no longer run once we convert to CalWIN effective June 5, 2006. In an effort to ease the transition to CalWIN and mitigate the risk that staff will not be able to process these reports/alerts in a timely manner for the first few months after conversion. Hard copies of the IEVS reports and MEDS alerts (for cases with critical & priority alerts only) will continue to be printed for approximately 180 days after conversion until line staff become more skilled at using the CalWIN Alert & Interfaces Subsystems to find this critical case information. Although all the IEVS reports and all the MEDS alerts will be posted online to CalWIN, printing the hard copies of critical information will allow staff to focus their efforts in those areas first.
FRC Print Requirements	 Printer/copier must be on local area network (LAN) Default duplex <u>printer</u> setting must be set to "off" Printer must be available daily (Monday – Friday) between 7:00am and 8:00am Make sure device power is on and has sufficient paper to print approximately 300 pages per day Monitor print for paper jams, etc.
FRC Print Information	 Continued printing of hard copies of critical & priority MEDS alerts and IEVS applicant abstracts will occur as follows: MEDS Alerts Only alerts requiring immediate attention will be printed – alert types of "CRITICL", "PRI-ACC", "PRI-ALT", or "PRI-REJ". Per Medi-Cal Program Guide Special Notice (PGSN) 05-09, CalWORKS PGSN 05-18, Foster Care PGSN 05-01, and Refugee Cash Assistance PGSN 05-01 (Reference ACWDL 05-19), staff must process MEDS alerts affecting eligibility and/or share of cost within mandated timeframes. Other alert types will be printed only if they are present on the same page as a critical or priority alert Page numbers will be blank on printed MEDS alerts All MEDS alerts, including critical & priority alerts are posted online in the CalWIN Alerts Subsystem IEVS Reports All IEVS applicant abstracts (average of 300 pages per FRC) will be printed to ensure we continue to receive complete IEVS information, including Medicare, UI/DI & Wage information pending resolution of CalWIN Change Requests 3848 and 3865 (ref. SR25191, 26288, 37105, & 37905) IEVS will also be posted online in the CalWIN Interfaces Subsystem but data may be incomplete Note: If a need is identified for hard copy distribution of additional reports, local printing will be evaluated post conversion.
Problem Resolution	Call the CalWIN Help Desk 619-515-6700 Note: Requests to resend print jobs that are not received the same day print is due may cause a delay if a duplicate print files need to be requested from the state.

Rev 06/08/06



IEVS

Income Eligibility Verification SystemJune 2005

Final V1.0







RECORD OF REVIEW AND CHANGES

Change Number	Brief Description of Change (include page numbers)	Date	Responsible Party
1.0	Initial document as part of Change Request 3122, incorporating training team and WCDS review	6/13/05	EDS CalWIN Training Team

CalWIN – IEVS/SAVE Interface

Interfaces are electronic transfers of data between computer systems. This document focuses on the electronic exchange of data between CalWIN and the Income/Eligibility Verification System (IEVS also includes Systematic Alien Verification for Eligibility [SAVE] transactions). The frequency of the various IEVS/SAVE reports and the data contained therein has not changed as a result of the IEVS/SAVE-CalWIN interface. IEVS/SAVE reports that used to be produced in hard copy are now provided to users in electronic format in CalWIN.

CalWIN's interface with IEVS/SAVE operates in a batch mode only; no online, real-time transactions are possible between the two systems. Files are created, formatted and transmitted from one system to the next using a standard File Transfer Protocol (FTP) process. Files are exchanged nightly, monthly, quarterly or on demand, depending on the business needs of the Consortium and the turn-around requirements for IEVS/SAVE processing. Some interface activities files are produced on applicants for aid, others for those who are recipients.

CalWIN alerts are triggered to inform appropriate users that the various forms of online IEVS/SAVE reports have been received and need to be processed. All IEVS/SAVE alerts are categorized as Informational Alerts that must be cleared by the user.

IEVS Interface Data

The IEVS/SAVE interface replaces the processing of paper IEVS/SAVE extracts. IEVS/SAVE information is stored in and displayed on windows in the Interface subsystem of CalWIN. The Interfaces subsystem should be thought of as the holding area for data received from any external system, including IEVS/SAVE. IEVS/SAVE data is not entered directly into windows in subsystems such as Data Collection, Employment Services, Benefit Recovery, etc. When processing IEVS/SAVE reports, the authorized user can compare the IEVS/SAVE data with known case data and verifications and, if necessary, enter the IEVS/SAVE data on the appropriate CalWIN windows and run EDBC to determine if the IEVS/SAVE data has any effect on eligibility or benefits.

IEVS and SAVE Interface Files and Reports

The chart below provides some basic information about the various IEVS and SAVE files that interface with CalWIN.

IEVS Interface File or Report	S = Sent from CalWIN R = Received from IEVS / SAVE	Frequency of Interface File or Report	CalWIN Alert Title	Who Receives Alert?	Comments
Applicant Data (IEVS and SAVE)	S	Nightly	N/A	N/A	The primary identifier for IEVS is a person's Social Security Number (SSN). The primary identifier for SAVE is a person's Alien identification number. Applicant data is sent to IEVS once an application for aid has been entered and saved. If the identifiers listed above are not present in the case when the initial applicant data transaction is sent to IEVS, the Send Forced Add Transactions to MEDS window can be used to send the transaction once the identifier(s) is known.
IEVS Applicant Report	R	Nightly	"IEVS Applicant Data Received" and/or "SAVE Report Received"	Eligibility Worker	Applicant information received from IEVS includes Unemployment Insurance (UI), Disability Insurance (DI), wage and employer information from EDD, asset information reported by the Franchise Tax Board (FTB) for a particular tax year, Title II and Title XVI benefit information from SSA, SSN validation from SSA, 40 quarters information from SSA, and Medicare information. If a SAVE report indicates the need to Initiate Secondary Verification, this must be done manually according to regulations and county policy and business practice; CalWIN does not automate the Secondary Verification process.

IEVS Interface File or Report	S = Sent from CalWIN R = Received from IEVS / SAVE	Frequency of Interface File or Report	CalWIN Alert Title	Who Receives Alert?	Comments
Payment Verification System (PVS)	R	Monthly (usually last week of month)	"PVS Report Received"	Eligibility Worker	When CalWIN receives the PVS file, it reviews the files and notes whether or not there is a discrepancy above a certain predetermined threshold with known data for both UI and DI. This is shown as a Y or N in the
		inditally	"IEVS PVS Report Received"	IEVS Coordina tor	Discrepancy field of the Search IEVS Recipient Reports window. The interface program does not do this kind of discrepancy review for RSDI; any such benefits that are included in the PVS file are shown on
			"PVS Report in Pending for 30 Days"	Eligibility Worker IEVS Coordina tor	the View IEVS-PVS Report window.

IEVS Interface File or Report	S = Sent from CalWIN R = Received from IEVS / SAVE	Frequency of Interface File or Report	CalWIN Alert Title	Who Receives Alert?	Comments
PVS Response	S	Nightly	N/A	N/A	As workers complete their processing of PVS reports and enter the results on the Create IEVS Response Document window, the completed responses are sent electronically to IEVS on a nightly basis. When the value in the Status field is changed to <i>Approved-Discrepancy</i> , and the window saved, CalWIN knows the PVS response can be sent to IEVS in the nightly batch process. <i>Approved-</i> Discrepancy is the only value that triggers the response to IEVS. Once the PVS response has been sent to IEVS, CalWIN changes the value to <i>Processed Discrepancy</i> on the Create IEVS Response Document window. If there is no discrepancy, no response is sent. NOTE: PVS is the only IEVS component for which a Response Document transaction is returned to IEVS. The Create IEVS Response Document window is completed for other reports in order to document online that processing of the component has been completed, but IEVS is not notified of the result. No online Response Document is completed for applicant reports.
New Hire Registry (NHR)	R	Monthly	"New Hire Report Received"	Eligibility Worker	Information is received from EDD on new employment of aided individuals.

IEVS Interface File or Report	S = Sent from CalWIN R = Received from IEVS / SAVE	Frequency of Interface File or Report	CalWIN Alert Title	Who Receives Alert?	Comments
National Prisoner Match (NPM)	R	Monthly	"NPM Report Received"	Eligibility Worker	Information is received from various law enforcement agencies on individuals who have been incarcerated for more than 30 days within the United States.
Integrated Fraud Detection (IFD)	S	Quarterly	N/A	N/A	This file is sent to IEVS the day after a calendar quarter ends, i.e., the report for the quarter January 1 through March 31 is sent on April 1. The file includes the income and other case data about each CalWIN case as of the date of the file creation.
Integrated Fraud Detection (IFD)	R	Quarterly	"IEVS IFD Report Received"	IEVS Coordina tor	At the time of this writing, CalWIN had not yet received an actual IFD file from the State. This report, when received, contains only those cases that have income or duplicate aid discrepancies. CalWIN is not required to further process the files to make comparisons to CalWIN data.

 $[\]ensuremath{^{*}}$ IEVS/SAVE alerts are not escalated.

Most of the IEVS interface files are actually sent to and processed by MEDS; only the IFD and PVS Response files from CalWIN are sent directly to IEVS.

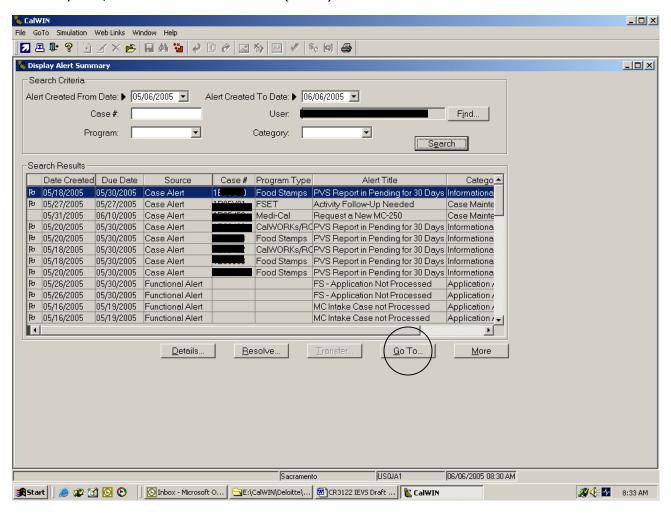
Processing IEVS/SAVE Information

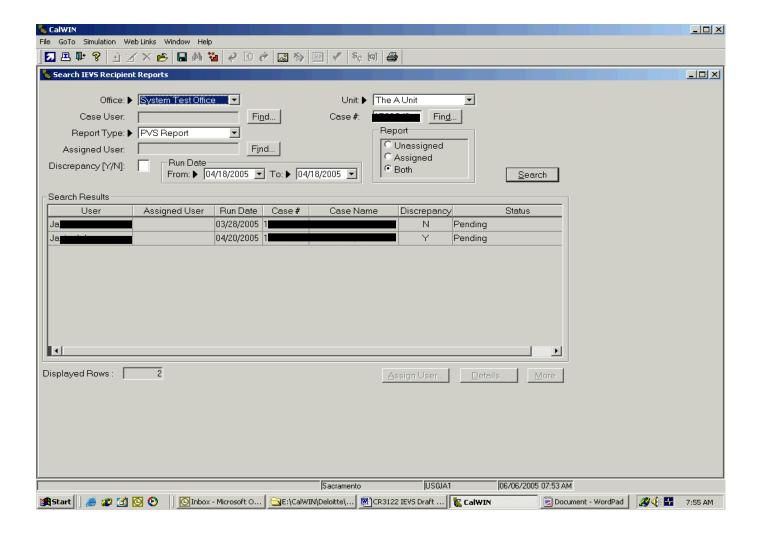
Access to IEVS Interface Windows

As is the case with CalWIN generally, access to the various Interface windows that hold IEVS/SAVE data is governed by the security settings and authorizations established by the County. The County's Security Coordinator should be consulted if access to the windows is not authorized for a user expected to process IEVS/SAVE reports.

Searching for IEVS Reports

The easiest way to search for and access an IEVS/SAVE report is through the **Display Alert Summary** window. Once you have listed your alerts and selected the IEVS/SAVE report alert you are seeking, click the **[Go To]** button to get to the **Search IEVS Recipient Reports** window for the case you chose. These windows are shown below. For assistance in completing the windows, please consult window-level Help, field-level Help and/or the Online User Manual (OLUM).





Another way to search for and access IEVS/SAVE reports is to use the **Search IEVS Applicant Reports** or **Search IEVS Recipient Reports** windows. Again, the step-by-step guidance for completing the windows can be found in the OLUM.

Discrepancy Research to Complete IEVS Reports

The only thing that has changed about how IEVS/SAVE reports are processed from the legacy system is where you find some of the research data. Both the paper case file and the electronic case file, i.e., CalWIN, are your sources of research material to determine how to resolve an IEVS/SAVE report. Which CalWIN windows you consult for your research depends heavily on which of the IEVS/SAVE reports you are processing.

In addition to reviewing the hard-copy Statement of Facts (SOF) and the monthly/quarterly/change report forms, some common CalWIN windows you may consult in your research include, but are not limited to:

Search Case Comments

- Display Employment History Summary/Collect Employment History Detail/Display Earned Income Summary
- Display Unearned Income Summary
- Display Individual Benefit Summary
- Display Institutional Care Summary
- Display Non-citizen Summary
- Display Liquid Asset Summary

You may also initiate a Data Collection gueue and review the case in a more general fashion.

Completion of the IEVS/SAVE Process

The IEVS/SAVE process is complete when you have:

- Reviewed IEVS/SAVE report(s) assigned to you.
- Researched and compared the information on the IEVS/SAVE report(s) with the CalWIN data to determine if any discrepancy exists.
- Acted on any discrepant data (i.e. requested additional information, completed or updated appropriate CalWIN windows, run EDBC, created claim(s), etc.).
- Recorded findings on the Create IEVS Response Document window, where appropriate.
- Resolved the IEVS alert on the **Resolve Case Alert** window.

San Diego County HHSA CalWIN

HOW TO...

HOW TO #	TITLE	ISSUE DATE
137	Request/View IEVS/SAVE	4/19/06

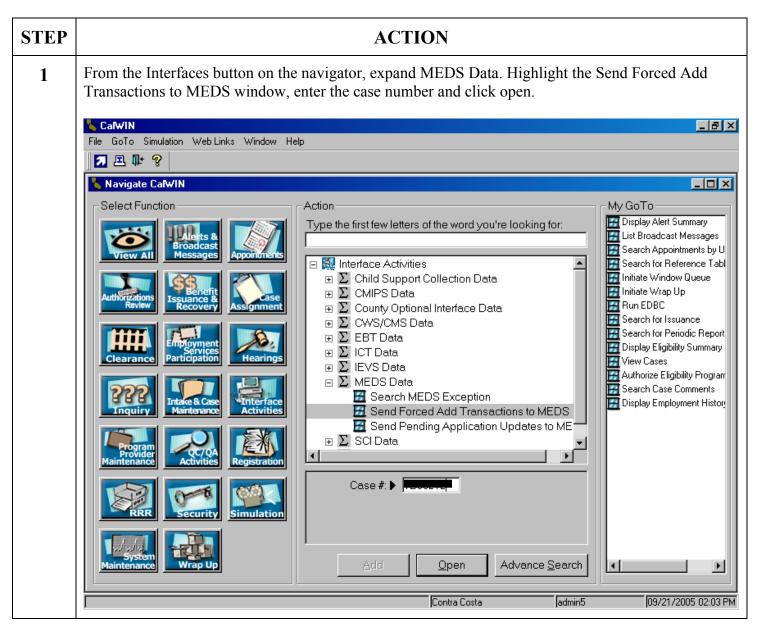
Program(s)/Staff:	All			
Description:	This How To describes the proper use of "Forced Add to MEDS" functionality offered via the "Send Forced Add Transactions to MEDS" window.			
	For new applicants (new case add or person add to existing case) a transaction is automatically sent to MEDS for IEVS/SAVE information. The Forced Add to IEVS/SAVE check boxes are used to request IEVS/SAVE reports manually at any time for any individuals, whether they are not requesting aid or not eligible in CalWIN, or are members of a CalWIN case.			
	It will usually take 3-5 days for the results to come back. Regardless of the request method (automatic, forced), this information is returned to CalWIN and displayed on the Search IEVS Applicant Reports Window when the user selects the desired report (Applicant Report/SAVE Report).			
References:	N/A			

INSTRUCTIONS

Instructions begin on page 2.

CalWIN

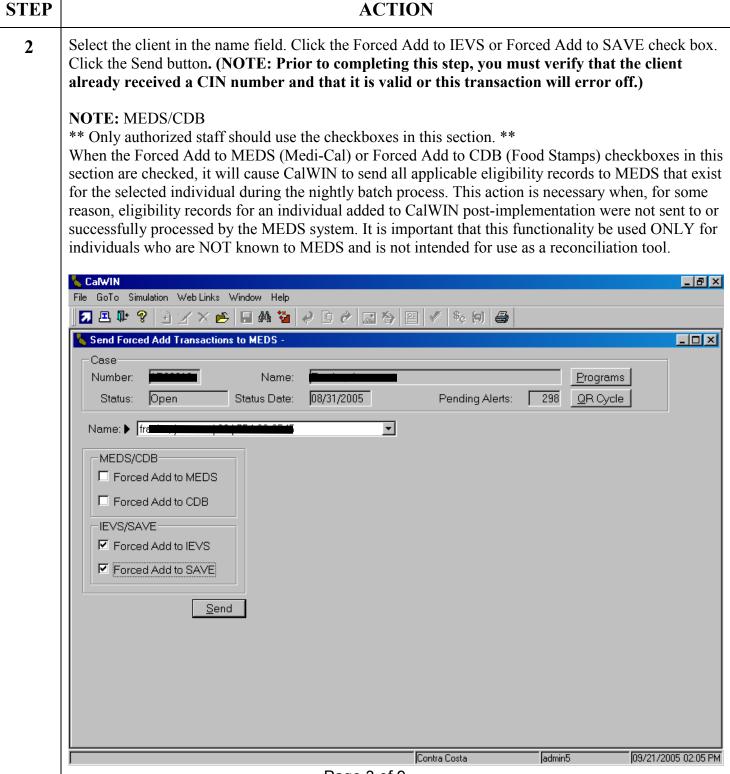
HOW TO #	TITLE	ISSUE DATE
137	Request/View IEVS/SAVE	4/19/06



CalWIN

HOW TO...

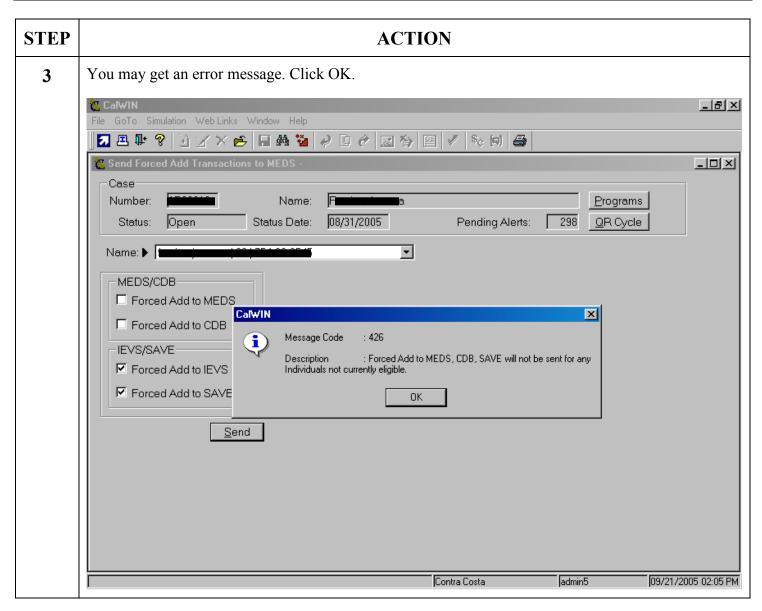
HOW TO #	TITLE	ISSUE DATE
137	Request/View IEVS/SAVE	4/19/06



Page 3 of 9

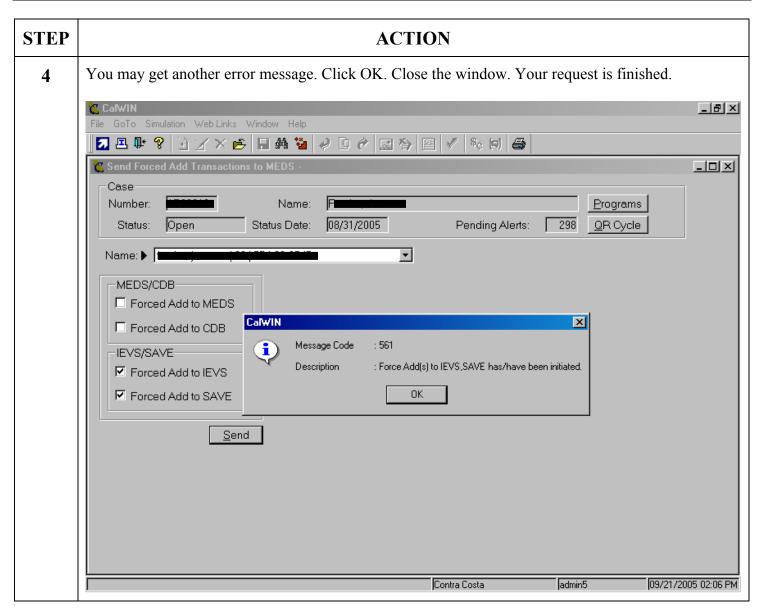
CalWIN

HOW TO #	TITLE	ISSUE DATE
137	Request/View IEVS/SAVE	4/19/06



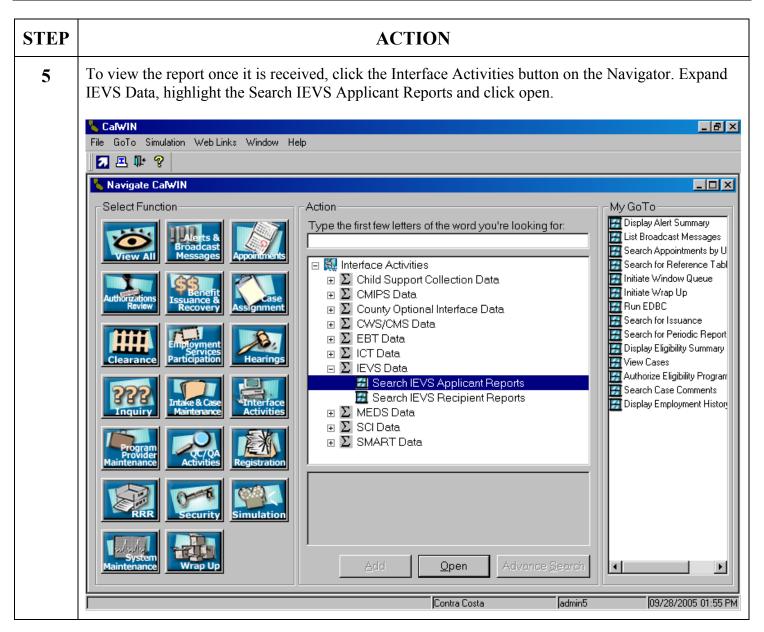
CalWIN

HOW TO #	TITLE	ISSUE DATE
137	Request/View IEVS/SAVE	4/19/06



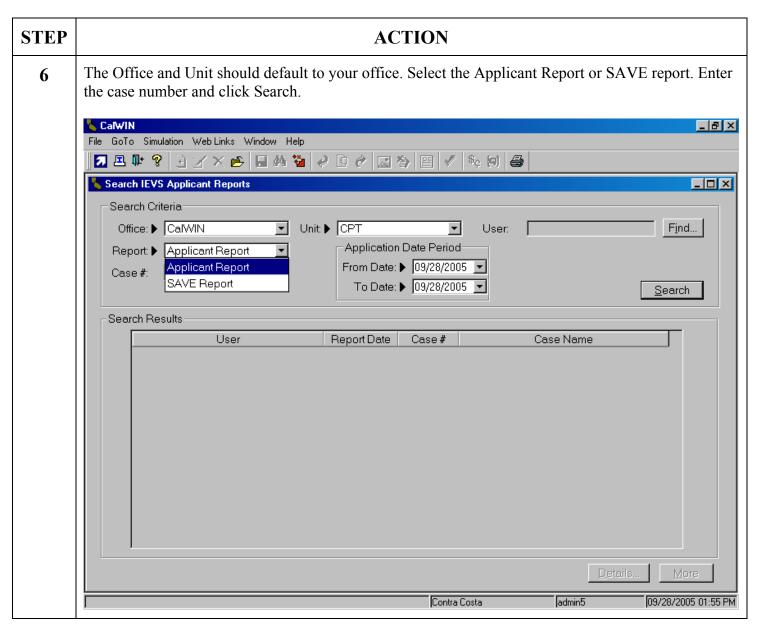
CalWIN

HOW TO #	TITLE	ISSUE DATE
137	Request/View IEVS/SAVE	4/19/06



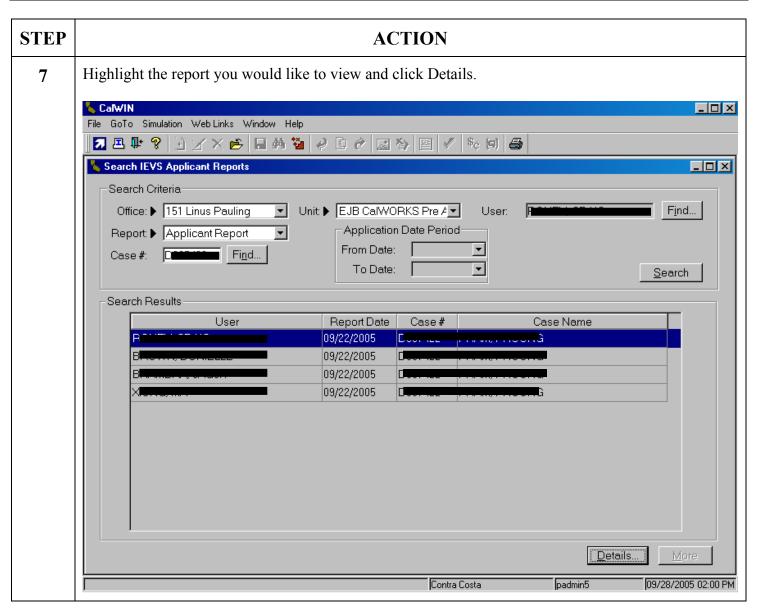
CalWIN

HOW TO #	TITLE	ISSUE DATE
137	Request/View IEVS/SAVE	4/19/06



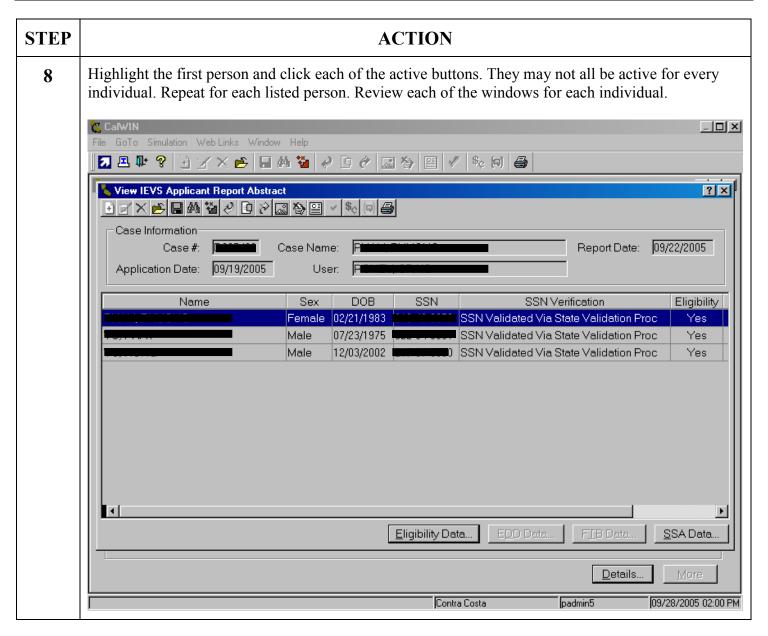
CalWIN

HOW TO #	TITLE	ISSUE DATE
137	Request/View IEVS/SAVE	4/19/06



CalWIN

HOW TO #	TITLE	ISSUE DATE
137	Request/View IEVS/SAVE	4/19/06



Desk Guide Post CalWIN

Processing MEDS alerts in CalWIN

Display Alert Summary screen

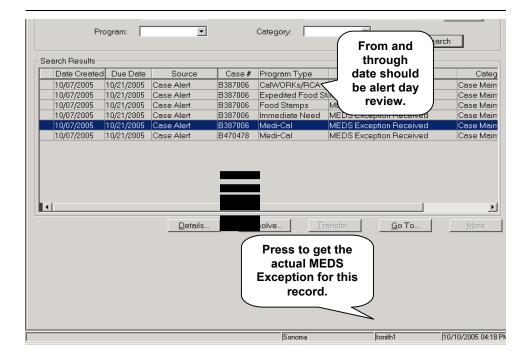
Processing MEDS alerts daily

Although you can access your MEDS alerts through the Interface Subsystem it is best to track them on a daily basis with the rest of your alerts under "MEDS Exception Received".

Unfortunately, CalWIN currently lists all MEDS exceptions individually for each "Program Type". To easily identify duplicated alerts on a case, click "Case #" to sort by case number. If there is more than one "Program Type" you only need to process one.

(The priority hierarchy should be CalWORKs, Medi-Cal followed by Food Stamps, for duplicated alerts, click "Resolve", and "No Action Needed").

Highlight the "MEDS Exception" that you want to review:



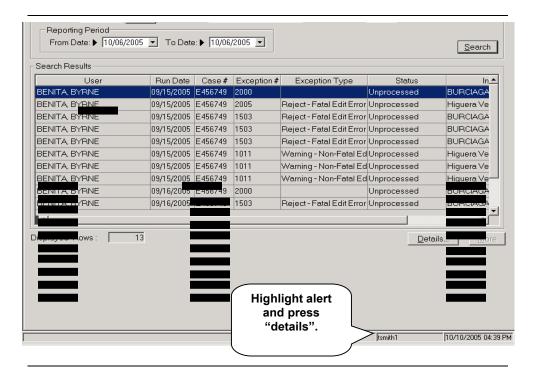
Processing MEDS alerts in CalWIN, continued

Search MEDS Exceptions

The MEDS Exceptions will appear. If some already show "processed", and you just want to look at those that have not been processed you can change the status to "unprocessed" on the drop down menu.

MEDS exceptions are sorted by date, exception number and individual. You can resort them into any order you like by clicking on the header name of any column.

At intake, when a case is approved, CalWIN sends separate transactions for the initial three months. MEDS then generates separate alerts for each transaction. You only need to process one of the alerts, you can leave the others "unprocessed". However, be certain that the alert is duplicated and not the same alert for a different individual on the case.



Additional Alerts

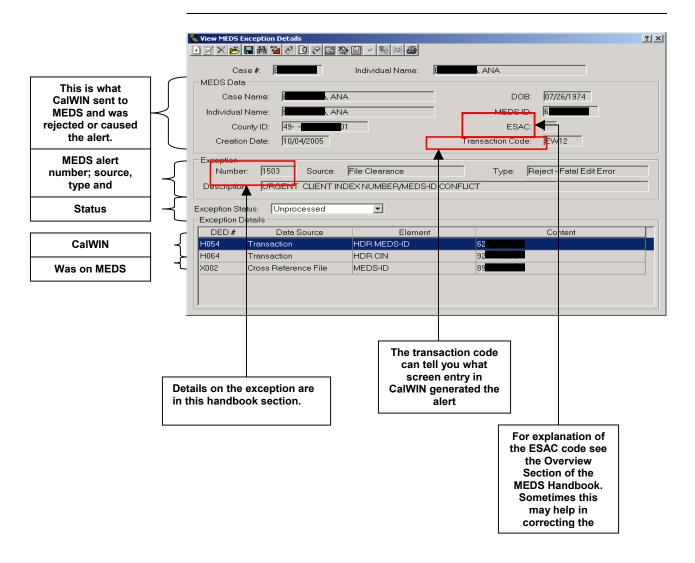
Just like CDS, if the problem is not fixed, the alert will be recreated the next time we make an entry in "Data Collection".

Currently in CalWIN we do not have the ability to suppress our MEDS, in CDS we could enter an N in the MCG box so additional unnecessary alerts were not generated.

Processing MEDS alerts in CalWIN, continued

View MEDS exception details

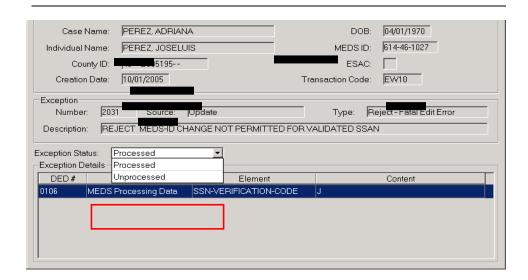
The alert message has virtually the same information that we would see normally on our paper alerts.



Processing MEDS alerts in CalWIN, continued

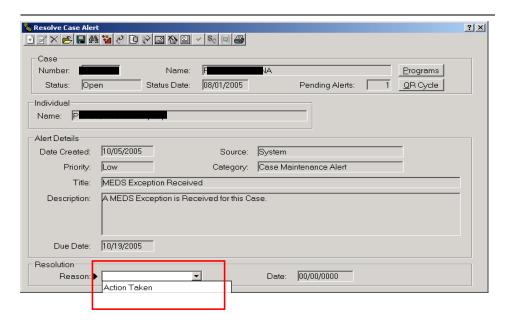
Exception status

After the problem ahs been fixed in MEDS or in CalWIN (and EDBC has been run), change the exception status to "processed". Save and close the "View MEDS Exception Details" window.



Resolve case alert

From the "Display Alert Summary" Screen you will need to actually resolve the alert, just like you do any of your alerts.



MEDS Alert Overview

Purpose

MEDS Alerts provide information for workers on MEDS updates, changes or problems.

Updates to MEDS can be submitted by:

- The current county of responsibility, or
- By another county, or
- Another agency (DHS, SSA, etc.) involved in the administration of programs supported by the MEDS Network.

Messages included in the alerts may be a result of:

- Problems encountered in processing adds and updates submitted by our county (either through CalWIN or on-line, or
- Updates submitted by other agencies (DHS, SSA, etc.) that affect a MEDS record, or
- Problems encountered in processing updates generated out of the quarterly Reconciliation process, or
- Changes made by MEDS as a result of the re-evaluation of a recipient's status during the month-end Renewal process.

In general, messages are sent to the responsible county when:

- There is an error in the transaction that requires follow-up action by the worker, <u>or</u>
- MEDS is aware of information which necessitates generation of a reminder message (e.g., Edwards v. Kizer, end of Special Program eligibility due to reaching a certain age, etc.).

MEDS Alert Overview, continued

Types of MEDS Alerts

There are five types of alerts produced by MEDS. These include:

Daily Eligibility Worker Alerts

- Generated daily from either CalWIN or on-line input by our county; or produced as a result of State or SSA input.
- Printed/distributed daily in the county; can also be accessed online on the MEDS INWA screen. (See "How to access INWA screen section").
- Some messages are informational only; others require corrective action.

Monthly Eligibility Worker Alerts

- Generated out of the month-end MEDS Renewal process (when <u>future</u> month becomes <u>current</u> MEDS month).
- Alert workers on beneficiaries that were given immediate need eligibility that has not yet been confirmed by granting the person on CalWIN.
- Alert workers of potential benefits for Medicare.
- Alerts workers of records put in Burman hold by MEDS (e.g. special program child turned 1 or 6)
- Advises workers when SSI/SSP (aid 10, 20 or 60) takes over a MEDS record.

• Urgent Edwards Alerts

- Generated out of the month-end MEDS Renewal process (when <u>future</u> MEDS month becomes current MEDS month).
- Edwards eligibility for the future calendar month is generated as a part of this Renewal process.
- Alerts workers when Edwards eligibility has continued for 2nd month or more. Follow-up action must be taken immediately.

Quarterly Reconciliation Process

- Informs EWs of discrepancies between the MEDS and the CalWIN (e.g. active on MEDS, inactive on CalWIN).
- Some errors are corrected by transactions generated as part of the Reconciliation process; other errors require prompt corrective action by the worker.
- May place a Burman hold on the recipient's record.
- If the recipient's current aid is an aid code covered under the Edwards
 v. Kizer settlement, records put into a hold status by this process and
 not released prior to the current month's MEDS Renewal will be turned
 into Edwards (aid 38) as part of the Renewal process.

MEDS Alert Overview, continued

Types of MEDS Alerts (con't)

NOTE: For a further explanation of the Reconciliation process, see Reconciliation Section of this Handbook.

- SSN Validation/Referral Alerts
 - SSN Validation process is generated <u>semi-annually</u>.
 - MEDS-IDs (SSNs) are compared to SSAs Numident File in Baltimore.
 - Results of the match (validated or unvalidated) are reported to the county.

NOTE: For a further explanation of this process see SSN Validation Section of your MEDS Handbook.

- SSN Referral process is generated <u>daily</u>.
 - SSAs response to the EW initiated SSN application process via an MC 194.
 - Are/can be intermingled with the Daily Eligibility Worker Alerts.

INWA screen

Purpose

The INWA screen allows you to see a list of the MEDS alerts that were issued in the past 60 to 90 days on a specific person. If you are researching a MEDS problem it is better to use the INWA screen than CalWIN. CalWIN only sends the alerts that <u>must</u> be addressed, there are a great deal more alerts that MEDS generates. Some of these additional alerts may help you in resolving a problem.

When to use

Staff may choose to use this screen when:

- you are attempting to correct a MEDS problem and you want to see a list of the alert messages issued
- CDS is showing the person active, but MEDS is showing them inactive – there is no case file available or no alert message in the file
- you would like to get a description of the alert message issued.

Accessing the INWA screen

To access the INWA screen, enter WA in the option field (on MEDS-not CalWIN).

INQM	** PRIMA	RY MEDI-C	AL/CMSP	INF	ORMAT	ION *	*	PWS		/11/05
CACE NAME	3010	DIOMBI	O.T.	ı		-		7 D.T		1:02
CASE-NAME COUNTY-ID 37-84-F	,ARLE 0-0-02	DISTRI EW-COD		1	0110 11			, ARL	ENE	
MEDS-ID 5					4			RD.		
BIRTHDATE 09-15-196			GOV-RSE	> 1	SAN D	TEGO		KD.	CA	92123
CHAINED-ID		-MC/CP-CHG			ADDRE		AG A	RES-	COUNT	
PRIOR-MEDS-ID		ST-OTH-CHG			APDP		CKLE		ECOVE	
	ATH-DT		EATH-CI		TERM-					
CIN 93 5C 2 HI	C-NO	В	IC-ISSU	JE 05	-09-0	5 P	APER-	ISSUE		
PGM: M C H 1		2		3			FS	Н	CW	
	2005=====						===>	2004=		:===>
10-05 PEND	JAN FEB	MAR APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
COUNTY 37	37 37	37 37	37	37	37	37	37	37	37	37
AID-CODE 84	84 84	84 84		84	84	84	84	84	84	84
ELIG-STAT 331	301 301	301 301	301	301	301	301	332	301	301	301
SOC-AMT										
CERT-DAY										
OHC N	N N	N N	N	N	N	N	N	N	N	N
RESTRICT										
MEDICARE HCP1-NUM										
HCPI-NUM HCPI-STAT										
	VALID OPTI	ONS> F3=S	IIMMARV.	F7=	BACK.	F8=F	ORWAR	D. EM	TER=P	ETHRN
OTTION WA CTIS	AVIIID OLII	10110/ 13-3	OLILIAIVI ,	, <u>r</u> /-	DACI(,	F 0-F	OTMAI	אום ,עו	T 11/1/1/	TT T O 1/11

Above is a list of all the alert messages that were generated in the past 60-90 days. To read a particular message, enter an "S" just before the message number and press enter.

See example #1

To get a description of the message alert, place the cursor over the first digit of the message number and press PF13.

See example #2

Example #1

MEDS ONLINE WORKER ALERT DETAIL PWS 10/11/05 TRAN-CODE: EW99 SOURCE: CREATE DATE: 07/26/05 DIST: EW: SD13 CASENAME: ,ARLE PERSON-NAME: CASENAME , ARLENE BIRTHDATE: 09/15/1965 COUNTY-ID: 37-84-0 0-0-02 MEDS-ID: 5 9504 ELIGIBILITY REDETERMINATION DUE ALERT CONTENTS DED DATA-ELEMENT 0250 MEDS REDETERMINATION DATE 09/ 0190 MEDS CURR ELIG STATUS 301

Example #2

MSG 9504

ELIGIBILITY REDETERMINATION DUE

Recipient's eligibility is due to be redetermined one month from now.

ACTION: Begin redetermination process.

OMSG - Optional Message

Press CLEAR to return

0005 DATE FIELD DOES NOT CONTAIN A VALID DATE

The date displayed in the message is missing or invalid. Dates must be 4 to 8 characters in length; the month must be from 01 through 12; the day must be valid for the month; and the year/century must be numeric. For example, February 29 is valid only in a leap year; day 31 is valid only for months having 31 days.

To correct:

To assist in researching, identify what transaction was sent (EW12, EW20, etc). Using Appendix 1 identify what screen in CalWIN may have sent the incorrect data. Determine correct date and run EDBC.

0007 NOT AN ACCEPTABLE INPUT VALUE FOR THIS FIELD

Data was submitted on this transaction which is not valid for a particular data field.

To correct:

To assist in researching, identify what transaction was sent (EW12, EW20, etc). Using Appendix 1 identify what screen in CalWIN may have sent the incorrect data. Correct the field and run EDBC.

0014 INVALID DATA ELEMENT NUMBER OR FIELD DELIMITER

The batch transaction submitted had improper coding. It is usually caused when unacceptable characters are included in some data (name, date, code, etc.) sent to MEDS (E.G. punctuation in a name, spaces where MEDS expects numbers, etc).

To correct:

To assist in researching, identify what transaction was sent (EW12, EW20, etc). Using Appendix 1 identify what screen in CalWIN may have sent the incorrect data. If the error is obvious, correct the field in CalWIN. Depending upon what transaction was rejected you may received other MEDS alerts.

If you are unable to determine what caused the edit, contact the MEDS coordinator, it might be a computer system problem.

0501 REQUIRED FIELD MISSING FOR THIS TRANSACTION

A field that is required for this transaction was not present when the transaction was submitted. Absence of the field has caused a fatal error.

To Correct:

To assist in researching, identify what transaction was sent (EW12, EW20, etc). Using Appendix 1 identify what screen in CalWIN may have sent the incorrect data. Correct and resubmit the transaction.

0503 DISPLAYED DATA ELEMENT NOT VALID ON THIS TRANSACTION

A batch input transaction contained a data element number that was not recognized as a valid data element for this transaction code.

To correct:

If the transaction should have updated MEDS information, submit updates as needed to correct MEDS. Contact the MEDS Coordinator to determine whether the problem is an incorrect data element number or an incorrect transaction code.

0504 INSUFFICIENT CLIENT IDENTIFICATION FIELDS REPORTED

Either:

A transaction that requires a full County-ID or birthdate did not have complete information in the required field *or*

A whole case transaction did not have at least County and Case Number in the County ID field, or

A transaction that requires either County-ID, MEDS-ID or CIN did not have complete information in at least one of those fields.

To correct:

If the transaction should have updated MEDS information, submit updates as needed to correct MEDS. Contact the MEDS Coordinator to determine whether the problem is an incorrect data element number or an incorrect transaction code.

0529 INVALID AID-CODE FOR THIS TRANSACTION

This error can result from using an aid code that is not compatible with one of the following data elements contained on the MEDS record such as age, SOC or sex.

To correct:

Verify that the transaction code is appropriate and/or the aid code submitted is valid for the transaction. If appropriate, resubmit the transaction with a different transaction code and/or aid code.

0535 | THE VALUE ENTERED IS NOT VALID FOR THIS TRANSACTION

The value displayed is not valid on this transaction for the field displayed with this message. The field displayed was a critical field to the update; therefore a fatal message was issued and the transaction did not update MEDS.

To correct:

Determine whether an inappropriate value was entered in the displayed field or whether a different transaction should have been used and then submit updates as needed to correct MEDS.

0536 THE VALUE ENTERED ISNOT VALID FOR THIS TRANSACTION

The value displayed is not valid on this transaction for the field displayed with this message. If there are no fatal messages for this transaction, some or all of the transaction information will have updated MEDS since this field was not critical to the update.

To correct:

Determine whether an inappropriate value was entered in the displayed field or whether a different transaction should have been used and then submit updates as needed to correct MEDS.

1038 | EDWARDS TERMINATION REASON REQUIRED TO TERMINATE EDWARDS

The termination reason entered on the transaction is not an acceptable termination reason to terminate Edwards eligibility.

To correct:

Review the transaction and resubmit with the appropriate termination code. Refer to the Termination Reason in the INQM Section for the acceptable Edwards termination reasons.

1047 | EFF-DATE AND ESAC REQUIRED WITH DISPLAYED DATA ELEMENT

This alert is generated when:

- 1) The ESAC or Eligibility Information Effective Date is missing on an eligibility update transaction; OR
- 2) An eligibility update transaction is releasing a hold and a data element not valid for this action is included on the transaction: new aid code, new serial number, new FBU, new person number, new share of cost (SOC) amount, pre/post code; OR
- 3) One of the following data elements is included on an eligibility update transaction and the ESAC is missing: new aid code, new serial number, new FBU, new person number, new share of cost (SOC) amount, pre/post code.

To correct:

Correct the appropriate fields and resubmit the transaction.

1073 DISPLAYED AID-CODES ARE IN DIFFERENT SEGMENTS ON MEDS

An eligibility update transaction was submitted to change the aid code and the new aid code is in a different MEDS eligibility segment from the old aid code. The old and new aid codes must be in the same MEDS eligibility segment.

To correct:

Verify that the new aid code is appropriate for the recipient and transaction. Resubmit the transaction if appropriate with an aid code of the same MEDS eligibility segment as the old aid code.

1081 INDIVIDUAL HIC-NO - HIC-NO SSN DOES NOT MATCH MEDS-ID

A transaction was submitted with an individual HIC NO and the SSN (the first 9 characters of the HIC NO) does not match the MEDS ID submitted on the transaction.

To correct:

Verify that the HIC NO should be an individual HIC NO; if it is, then verify that the SSN matches the MEDS ID submitted on the transaction. Resubmit the transaction if appropriate with the SSN of the individual HIC NO matching the MEDS ID on the transaction.

1083 AGE NOT WITHIN ACCEPTABLE RANGE FOR AID-CODE

This alert is generated for an MB30 transaction when

- 1) aid code 14 is submitted on the transaction and the calculated age of the recipient in months is less than 780 months (65 years); OR
- 2) A new birthdate and new aid code are submitted on the transaction with an aged aid code (first digit of the aid code is '1') and the calculated age of the recipient in months is less than 780 months (65 years); OR
- 3) A new birthdate is submitted on the transaction, the aid code on MEDS is an aged aid code (first digit of the aid code is '1') and the calculated age of the recipient in months is less than 780 months (65 years).

To correct:

Verify that the aid code and birthdate on the transaction are correct for this recipient. Correct the appropriate information and resubmit the transaction.

1094 | DISPLAYED DATA ELEMENTS CONTAIN CONFLICTING INFORMATION

One or more of the data elements displayed with this message contain conflicting information. For example, the aid code requires a share of cost and no share of cost was reported or the ESAC indicates a closed period of eligibility and no termination date was reported. Since the conflicting fields were critical to the update, this transaction did not update MEDS.

To correct:

Determine which of the displayed data elements contain incorrect information and then submit appropriate updates to correct MEDS.

1096 DATE FIELD CONTAINS AN UNREASONABLE DATE

If more than one date from the transaction is displayed, then the dates are considered unreasonable based on comparison of the two dates, for example, a termination date prior to an effective date. If only one date is displayed from the transaction, it is considered an unreasonable date based on the other fields displayed, for example, an effective date greater than MEDS future month or an INS entry date greater than the current system date. Since the unreasonable date was critical to the update, this transaction did not update MEDS.

To correct:

Determine which of the displayed data elements contain incorrect information. Submit updates as needed to correct MEDS. Refer to the Data Element Dictionary for more information on reporting requirements for displayed data elements.

1501 COUNTY-ID/MEDS-ID CONFLICT

This alert is generated when:

- there is no CIN on the transaction or the CIN on the transaction is not known to MEDS;
- the County ID on the transaction is known to MEDS;
- the MEDS-ID reported on the transaction does not match the current MEDS-ID associated with that County ID on the MEDS County ID Cross Reference File; and
- the MEDS-ID reported on the transaction is not a previously used MEDS-ID associated with the County ID Cross Reference File MEDS-ID.

When a CIN is reported on the transaction and that CIN is known to MEDS, alert 1504 will be issued instead of alert 1501.

To correct:

What does the MEDS record show for this person?
What does the county system record show for this person?
Compare and decide which system has the correct client information.
Fix the system with the incorrect information.

For additional information refer to Attachment #3 on "File Clearance".

1502 COUNTY-ID/BIRTHDATE CONFLICT

This alert is generated when:

- there is no MEDS-ID on the transaction;
- the County ID on the transaction is known to MEDS; and
- the birth date reported in the transaction header does not match the birth date associated with the County ID on the MEDS County ID Cross Reference File.

<u>Remember:</u> when granting a person, the birthdate on CalWIN <u>must</u> match MEDS even if MEDS is wrong.

To correct:

After the conflict is resolved and assuming the original update to MEDS is still appropriate, resend the original transaction update via the county system or via a MEDS online transaction.

EXAMPLES: A conflict can occur when the new county does an intercounty transfer to take over a record and reports a birth date correction in conjunction with taking over the record from the former county. If the rejected eligibility update is for the month the record was in the new county's control, then the original update does not need to be resent to MEDS.

If it is determined that the birth date on the county system is correct, use existing procedures for resolving MEDS related issues.

For additional information refer to Attachment #3 on "File Clearance".

1503 CLIENT-INDEX-NUMBER/MEDS-ID CONFLICT

This alert is generated when:

- there is a CIN on the transaction that is known to MEDS;
- the MEDS-ID reported on the transaction does not match the MEDS-ID associated with that CIN on the MEDS CIN Cross Reference File; and
- the MEDS-ID reported on the transaction is not a previously used MEDS-ID associated with the CIN Cross Reference File MEDS-ID.

To correct:

What does the MEDS record show for this person?
What does the county system record show for this person?
Compare and decide which system has the correct client information.
Fix the system with the incorrect information.

For additional information refer to Attachment #3 on "File Clearance".

1504 CLIENT-INDEX-NUMBER/MEDS-ID VS COUNTY-ID/MEDS-ID CONFLICT

This alert is generated when:

- there is a CIN on the transaction that is known to MEDS;
- the MEDS-ID reported on the transaction matches the MEDS-ID associated with that CIN on the MEDS CIN Cross Reference File;
- the County ID on the transaction is known to MEDS; and
- the MEDS-ID reported on the transaction does not match the current MEDS-ID associated with the County ID on the MEDS County ID Cross Reference File.

If a CIN is not reported in the transaction or the CIN that is reported in the transaction is not known to MEDS, alert 1501 will be issued instead of this alert 1504.

To correct:

After resolving the conflict and assuming the original update to MEDS is still appropriate, resend the original update to MEDS via the county system.

For additional information refer to Attachment #3 on "File Clearance".

1508 | SCI CIN/MEDS-ID CONFLICT – MEDS-ID CHANGE REQUIRED

The CIN was NOT submitted on the transaction; the transaction MEDS ID was used to find the CIN on the Statewide Client Index. A CIN found on the Statewide Client Index, but that CIN is not associated with the MEDS ID on the transaction.

To correct:

Once the conflict has been resolved, if the original transaction update to MEDS is still appropriate, resend the original update to MEDS via the county system.

1509 TWO MEDS RECORDS HAVE SAME CIN; CHAINING REQUIRED

Two different MEDS IDs on MEDS are using the same Client Index Number (CIN). These two MEDS records are potentially duplicate records.

To correct:

Determine whether the two MEDS IDs are for the same client. If the two MEDS IDs belong to the same client, they are duplicate records. You must complete an HSD256 asking that the records be chained.

If the two MEDS IDs belong to different clients, they are not duplicate records; they should be two separate MEDS records. In this situation the record should be referred to the MEDS Coordinator.

1510 TRANSACTION FAILED MEDS NAME/BIRTHDATE MATCH CRITERIA

This alert is generated when:

- the MEDS-ID on the transaction is known to MEDS;
- the transaction header birth date does not match the birth date on the MEDS record for that MEDS-ID;
- the new birth date, if reported on the transaction, does not match the birth date on the MEDS record for that MEDS-ID; and
- the MEDS name/birthdate match criteria does not produce a sufficient match to be reasonably certain that the person in the county transaction is the same person known to MEDS with the MEDS-ID on the transaction.

To correct:

What does the MEDS record show for this person?

What does the county system record show for this person?

Determine if the CIN, MEDS-ID and/or County-ID reported on the transaction is associated with a different person on MEDS.

Determine if there are two records for two different people.

Determine if a MEDS-ID change is necessary.

Determine if a new County-ID must be assigned and/or if there is a CIN conflict that will need to be resolved.

Decide what system holds the correct information and either MEDS or CalWIN.

For additional information refer to Attachment #3 on "File Clearance".

1513 HIC-NO BELONGS TO ANOTHER MEDS-ID

A transaction was submitted to change the HIC-NO and the new HIC-NO is already known to MEDS for a different record.

To correct:

Verify that the new HIC-NO was entered correctly. Resubmit the transaction if appropriate with the correct HIC-NO.

2000 | MEDS ID NOT ON FILE

If the MEDS-ID is submitted on the transaction, it must match an MEDS-ID on file.

To correct:

Compare the transaction MEDS-ID to the file MEDS-ID and determine the correct number. Correct and resubmit the transaction.

2003 MEDS-ID BIRTHDATE CONFLICT

This alert is generated for MEDS-ID change transactions (e.g., EW10's) when:

- the MEDS-ID on the transaction is known to MEDS; and
- the birth date on the transaction header does not match the birth date on the MEDS record for that MEDS-ID.

This alert is generated for client information update transactions (e.g., EW12's) when:

- the MEDS-ID on the transaction is known to MEDS;
- the birth date on the transaction header does not match the birth date on the MEDS record for that MEDS-ID;
- the new birth date, if reported on the transaction, does not match the birth date on the MEDS record for that MEDS-ID; and
- there is no CIN reported on the transaction or the MEDS birth date range editing criteria did not produce a sufficient match to be reasonably certain that the person on MEDS with the associated MEDS-ID is the same person on the county transaction.

To correct:

Review CalWIN to determine that the client information reported on the transaction is correct. Review the MEDS information to determine if the birth date on MEDS is correct. If there are two records for two different persons, determine if a new MEDS ID is required or if the same person, determine if the birth date is correct, then fix the wrong one using existing procedures for resolving MEDS related issues.

2005 TRANSACTION COUNTY-ID DOES NOT MATCH MEDS

This alert is generated for client information update transactions (e.g., EW12s) when the County ID (county, serial number, and FBU if reported) in the transaction does not match any current, pending or future County ID on MEDS in the Primary, Special 1, Special 2, Special 3, Food Stamp or Pending Application segments.

This alert is generated for MEDS-ID change transactions when:

- There is a current or ongoing active federal or county controlled case in the MEDS Primary, Special 1, Special 2, Special 3, IE/RR, Food Stamp or Pending Application segments; and
- The County ID (county and serial number) in the transaction does not match either the current, pending, or future County ID in the MEDS Primary, Special 1, Special 2, Special 3, Food Stamp or Pending Application segments.

This alert is generated on food stamp modify transactions (e.g., FX40s) when the client is not active in another county and the transaction County ID (county and serial number) does not match MEDS for the update segment and time period indicated on the transaction.

This alert is generated for all other modify transactions when:

- the client is not active in another county; and
- the full transaction County ID does not match MEDS for the update segment and time period indicated on the transaction.

When the transaction aid code does not match MEDS and MEDS has aid code 38 eligibility, the transaction aid code will be compared to the original aid code (i.e., the eligible aid code reported by the county before MEDS rolled the eligibility into aid code 38) before the alert is issued.

Before issuing alert 2005 for modify transactions, MEDS will adjust the effective date forward, if possible, to match an eligibility update that may have been adjusted forward due to a current month eligibility conflict. If the effective date was adjusted and the update still could not be applied, alert message 2184 is issued along with this alert.

For modify transactions, when the client is active in another county, alert message 2078 will be issued instead of alert 2005.

2005 Con't

TRANSACTION COUNTY-ID DOES NOT MATCH MEDS

To correct:

Determine why the County ID on the transaction does not match a County IDs on MEDS. Check the MEDS record, the prior MEDS worker alerts (INWA and/or county file), the county records, and prior county updates sent to MEDS to find the source of the problem. As appropriate, correct the source problem and resubmit the information on the original transaction update(s) to MEDS.

EXAMPLES:

CalWIN sends an eligibility update transaction to MEDS. It is rejected due to a County ID conflict and an alert 2005 is issued but the problem is not fixed. If another eligibility update to MEDS is sent with the same County ID, MEDS will also reject this transaction. In this case, resolve the problem stemming from the first alert and then, if necessary, resubmit the MEDS online transaction to report the information that was rejected in the previous updates.

CalWIN sends a termination transaction on a client whose program eligibility has changed (e.g., from CalWORKs to Foster Care). The transaction is rejected because the new program has already sent a transaction to update eligibility on MEDS before the transaction to discontinue eligibility is processed. In this case, no further update to MEDS is necessary.

An online transaction to MEDS with an erroneous County ID and an alert is issued. Reenter the MEDS online transaction with the appropriate County ID.

CalWIN sends an inappropriate update for an individual who is no longer a member of a case. In this situation, do not send an update to MEDS. Instead, a CalWIN system problem report should be initiated to the county systems staff so that inappropriate updates and corresponding alerts can be researched and eliminated.

2015

RECIPIENT ALREADY ACTIVE IN REQUESTING COUNTY

An add transaction was submitted to MEDS/CDB but rejected because there is an active file already on MEDS. The ESAC used was invalid for a recipient who is already active on the MEDS file for the month covered by the transaction.

To correct:

Identify what other record the client is active under, correct CalWIN as appropriate.

2022 ICT – RECIPIENT NOT ACTIVE IN ANOTHER

The recipient does not show eligibility on MEDS in the month immediately prior to the effective date of the EW05. An EW05 is appropriate only when recipient eligibility is continuous, when there is no break in eligibility between the last month in the old county and the effective date of the EW05.

To correct:

Verify that the MEDS-ID and the effective date were entered correctly. If not, correct and resubmit. If they correct, do a MEDS inquiry to verify the eligibility information on MEDS. If MEDS does not show eligibility in the month prior to the correct effective date in your county, resubmit your update using an EW20 Add Transaction.

2030 BUY-IN ELIGIBLE-CONTACT BUY-IN FOR HIC-NO CORRECTION

If Medicare has been bought in by the State, the county may not change the HIC number. The Medicare code on the file in this case will be "2" for Medicare Part B.

To correct:

Request a MEDS inquiry and review the transaction information against the file information. If a wrong HIC-NO was used on the transaction, correct and resubmit. If the HIC-NO is incorrect on the MEDS file, submit a DHS 6166 form to the Medicare Buy-In Unit requesting correction.

2031 MEDS-ID CHANGE NOT PERMITTED FOR VALIDATED SSAN

The MEDS-ID (SSN) on the file has been validated by SSA as belonging to this recipient and may not be changed by your county.

To correct:

If there is proof that this is not the SSN for this recipient, refer the recipient to the local Social Security Administration Office for verification with an MC194 form. When the MC194 is returned with the correct SSN for the recipient, submit an EW03 transaction to remove the SSN verification code and then the EW10 transaction to change the MEDS ID.

2078 RECIPIENT ALREADY ACTIVE IN ANOTHER COUNTY

An EW20 add transaction has been submitted for a recipient who is already active in another county for part or all of the time period covered by the transaction.

To correct:

Verify that the COUNTY-ID on the error message is the same COUNTY-ID on the Intercounty Transfer papers.

2130 DECEASED PER MEDS – VERIFY DEATH STATUS

The MEDS record indicates that this recipient is deceased and an accelerated eligibility transaction or an eligibility add/update transaction was submitted to MEDS; or a BIC issuance was requested.

To correct:

If you have information indicating that this recipient is not deceased, submit an online to MEDS operator requesting that the death code be removed.

2155 REFUGEE/ALIEN INFORMATION INCOMPLETE OR INCONSISTENT

The MEDS AID-CODE indicates a Refugee aid code but the Refugee/Alien Indicator was not 0 or 9.

To correct:

Correct the AID-CODE or Refugee/Alien Indicator and resubmit the transaction.

2166 MEDICARE AID-CODE REQUIRES APPROPRIATE HIC-NO

A Buy-In transaction or a county transaction for Qualified Medicare Beneficiary (QMB) pending part A confirmation was submitted for a Medicare eligible to either

- 1) update eligibility and there was no HIC-NO on the transaction; or
- 2) remove the HIC-NO.

The HIC-NO can not be removed for a Medicare aid code.

2184 | EFFECTIVE DATE ADJUSTED DUE TO ELIGIBILITY CONFLICT

This alert is issued to advise county staff that MEDS changed the effective date on their transaction. The client's MEDS record showed conflicting eligibility for the time period covered by the transaction, so the effective date was adjusted forward one month past the conflicting month in order to try to post the requested change. In most cases this adjustment should allow MEDS to post the update. Sometimes this message will be accompanied by another message indicating that MEDS was unable to post the update due to no matching County ID or qualifying eligibility found on MEDS after the effective date was adjusted.

To correct:

Check the MEDS record to determine if the update was posted. If the update was not posted, check the MEDS worker alerts (INWA and/or county file) to find other alerts which indicate the source of the problem. As appropriate, correct the source problem and resubmit the information on the original transaction update(s) to MEDS.

6002 RECON RECORD ON COUNTY/NOT ON MEDS – NO RECON UPDATE GENERATED

This message is generated for Legacy transactions only, when: 1) a matching record for the displayed segment type was not found on MEDS; 2) the county transaction does not contain invalid data in any critical eligibility fields; and 3) the transaction aid code is identified as a continuing-aid code. A Recon update was NOT generated to add the county transaction to MEDS because these aid codes require a term date on the transaction, and MEDS does not know what the term date should be (the term date is not reported on the legacy Recon transaction).

To correct:

Counties should review the eligibility data in their system and in MEDS. If necessary, modify the county system to reflect the correct data and/or initiate an update to MEDS, with an appropriate termination date, to synchronize MEDS with the county information.

6004 RECON RECORD ON MEDS/NOT ON COUNTY - RECON TERM GENERATED

This message is generated when a record for the displayed segment type was found on MEDS that did not have a matching record on the county file; the Recon change date on MEDS for the Recon transaction segment type was prior to the creation date on the county Recon file; and one of the following situations occur:

- the MEDS record contains Food Stamp eligibility; or
- the MEDS record contains other than Food Stamp eligibility that is presumed inactive. Eligibility is presumed inactive when the last MEDS eligibility update was more than 6 months in the past. This additional evaluation will limit termination of Medi-Cal eligibility to only those records that have not been recently updated. A Recon update was generated to terminate the eligibility segment on MEDS.

To correct:

Counties must check their system to ensure the county record was not omitted from the county file in error. If the record was omitted from the county file in error, counties must initiate the appropriate corrective measures to reverse the termination on MEDS prior to the next RENEWAL.

6005 RECON RECORD ON MEDS/NOT ON COUNTY – RECON HOLD GENERATED

This message is generated when a record for the displayed segment type was found on MEDS that did not have a matching record on the county file; the Recon change date on MEDS for the Recon transaction segment type was prior to the creation date on the county Recon file and the MEDS record contains other than Food Stamp Eligibility that is presumed to be active.

Eligibility is presumed active when the last MEDS eligibility update was within the most recent 6 month period. This additional evaluation will prevent the termination of active MEDS eligibility that cannot be reported on the county Recon file due to county system limitations. A Recon update was generated to place the MEDS record on Hold pending further county action.

To correct:

Counties must check their system to ensure the county record was not omitted from the county file in error. If the record was omitted from the county file in error, counties must initiate the appropriate action to remove the Hold status from MEDS.

6006 DUP RECORDS ON COUNTY RECONFILE - RECONHOLD GENERATED

This message is generated when multiple records were found on the county file with the same MEDS-ID and segment-type (other than Food Stamp) and a matching record was found on MEDS. A Recon update was generated to place the MEDS record in a Hold status pending further county action.

Only two duplicate county records will be displayed under the alert contents. If there are more than two duplicates, alert message 6009 is also issued to notify the county of how many additional duplicates were found.

When this alert is generated, no further reconciliation is done for the Recon transaction.

To correct:

Counties must identify all duplicate county records and determine which, if any, is the correct record. Modify the county system to reflect the correct data and initiate the appropriate action to correct MEDS and remove the Hold status.

6008 DUP RECORDS ON COUNTY RECONFILE - NO MATCH ON MEDS

This message is generated when multiple records were found on the county file with the same MEDS-ID and segment-type and no matching record was found on MEDS. A Recon update was not generated.

Only two duplicate county records will be displayed under the alert contents. If there are more than two duplicates, message 6009 will also be issued to notify the county of how many additional duplicates were found.

When this alert is generated, no further reconciliation is done for the Recon transaction.

To correct:

Counties must identify all duplicate county records and determine which, if any, is the correct record. Modify the county system to reflect the correct data. If necessary, initiate an update to MEDS to establish eligibility.

9004 ACTIVE MEDI-CAL RECIPIENT - DECEASED PER BUY-IN

MEDS has received a Buy-In transaction that indicates that this recipient is deceased.

ACTION: Verify death information. If you have information indicating that this recipient is deceased, follow your county procedures to update your county system and MEDS appropriately. If you have information indicating that this recipient is not deceased, submit an EW03 transaction to remove the death date.

9005 | ACTIVE MEDI-CAL RECIPIENT - OUT-OF-STATE PER SSA BUY-IN

MEDS has received a Buy-In transaction that indicates that this recipient has moved out of state.

To correct:

Contact the recipient and verify residence address; follow your county procedures to update your county system and MEDS as appropriate.

9021 INTER-COUNTY TRANSFER REPORTED IN OTHER MEDS SEGMENT

Since the programs that a client is eligible for may change when a client moves to a new county, this message is issued when an inter-county transfer updates MEDS and there is ongoing or future eligibility in another segment. This message is intended as an alert that a termination action may be needed to discontinue the MEDS eligibility in your county.

To correct:

If you get alert message 9022 with the same County-ID as on this message, it indicates that a subsequent transaction from the new county took over the eligibility that generated this alert. If you do not get a matching 9022 alert, then you need to determine whether the MEDS eligibility for your client should be discontinued and submit updates as needed to correct MEDS.

9033 DEEMED NEWBORN - MOM ADDRESS DIFF ON MEDS - VERIFY ELIG

This alert is generated when an infant is deemed eligible via the CHDP Gateway enrollment process and the address on the enrollment transaction does not match the mother's address on MEDS. This alert is used to notify the county of an infant who needs to be added to their mother's case and whose ongoing eligibility needs to be reevaluated as he/she may no longer be living with the mother.

If the address in the enrollment transaction matches the mother's address on MEDS, alert 9034 will be issued instead of alert 9033.

To correct:

Add the deemed newborn infant to the mother's case beginning with the birth month and redetermine the infant's ongoing eligibility for Medi-Cal.

NOTE: When adding the infant to the mother's case, the Client Index Number (CIN) on the deemed infant's MEDS record must be entered into the CalWIN to ensure that the infant's eligibility reported from the county system to MEDS is linked to the appropriate MEDS record. If the county has already reported the unborn child to MEDS as a member of the mother's case, then that MEDS record will need to be chained by completing a EW11.

9034 DEEMED NEWBORN - COUNTY ELIGIBILITY DETERMINATION REQUIRED

This alert is generated when an infant is deemed eligible via the CHDP Gateway enrollment process and the address of the enrollment transaction matches the mother's address on MEDS. Alert 9034 is used to notify the county when an infant needs to be added to the mother's case. If the address on the enrollment transaction does not match the mother's address on MEDS, alert 9033 will be issued instead of alert 9034.

To correct:

Add the deemed newborn infant to the mother's case beginning with the birth month. Redetermine the infant's ongoing eligibility for Medi-Cal if case information indicates that a reevaluation is needed (refer to ACWDLs 03-49, 04-02, and any subsequent related ACWDLs).

NOTE: When adding the infant to the mother's case, either the MEDS-ID or the Client Index Number (CIN) on the deemed infant's MEDS record must be entered into the county system to ensure that the infant's eligibility reported from the county system to MEDS is linked to the appropriate MEDS record. If the county has already reported the unborn child to MEDS as a member of the mother's case, then that MEDS records will need to be combined via MEDS on-line.

9514 POSTPARTUM EXCEEDED TWO MONTHS-ELIG TERMINATED BY MEDS

For the 60-Day Postpartum Program, renewal checked to determine whether the recipient has already received two months of postpartum eligibility. If she has, and the county has not terminated eligibility, MEDS will terminate eligibility, post a "PP" in the "TERM-REAS" field.

To correct:

The county should ensure that proper notices have been sent and determine if the recipient is eligible for another Medi-Cal program.

9524 TWELFTH MONTH PREGNANCY PROGRAM-VERIFY CONTINUING ELIG

The recipient has been in a pregnancy aid code for 12 months.

To correct:

ACTION: Since eligibility in these aid codes covers the duration of pregnancy plus 60 days, this optional message is generated at renewal requesting verification of continuing pregnancy eligibility.

9529 TMC PERIOD EXCEEDED ALLOWED MONTHS - ELIG TERMINATED

The recipient is in an additional transitional Medi-Cal program and has reached the end of the continuing eligibility period; therefore the TMC eligibility is terminated by MEDS.

To correct:

Check your county system to verify whether they have been terminated. If so, then the termination is probably appropriate and no further action is needed. If the recipient is not terminated in your county system, initiate a MEDS transaction in your county system to terminate their eligibility.

9530 MEDS ESTABLISHED EDWARDS-MEDI-CAL DETERMINATION NEEDED

This alert is a reminder to counties to do an SB87 Medi-Cal redetermination on a discontinued county administered cash-linked client (aid code 38). The redetermination must be completed prior to the next timely notice of action (NOA) cutoff date.

Alert 9530 is generated for the first month of ongoing Medi-Cal eligibility in aid code 38.

This alert indicates that:

- o the county has not yet completed the SB87 Medi-Cal redetermination; or
- the county did not successfully update MEDS on the outcome of the SB87 redetermination.

To correct:

If the SB87 Medi-Cal redetermination was already completed, check MEDS records, prior MEDS alerts (INWA and/or county file), the county records, and prior county updates sent to MEDS for the source of the conflict or problem. If the SB87 disposition update was rejected, resolve the problem identified in the original alert message and then verify that an update from the county system has either overlaid or terminated the aid code 38 eligibility. If necessary, submit a MEDS online transaction to report the information from the SB87 disposition. If MEDS was not updated but the county system was, then there is a county system or procedure problem that needs to be resolved.

If the Medi-Cal SB87 redetermination has not been completed, complete the process (refer to ACWDL 01-36 and any subsequent related ACWDLs). After completing this process, verify that the county system has updated MEDS appropriately so that the aid code 38 on MEDS is either overlaid or terminated.

9531 THIRD EDWARDS MONTH - CHECK MEDI-CAL DETERMINATION STATUS

This alert is a reminder to counties to do an SB87 Medi-Cal redetermination on a discontinued county administered cash-linked client (aid code 38). The redetermination must be completed prior to the next timely notice of action (NOA) cutoff date.

Alert 9531 is generated when a client reaches their third month of continuing Medi-Cal eligibility in aid code 38.

This alert indicates that:

- o the county has not yet completed the SB87 Medi-Cal redetermination; or
- the county did not successfully update MEDS on the outcome of the SB87 redetermination.

To correct:

If the SB87 Medi-Cal redetermination was already completed, check MEDS records, prior MEDS alerts (INWA and/or county file), the county records, and prior county updates sent to MEDS for the source of the conflict or problem. If the SB87 disposition update was rejected, resolve the problem identified in the original alert message and then verify that an update from the county system has either overlaid or terminated the aid code 38 eligibility. If necessary, submit a MEDS online transaction to report the information from the SB87 disposition. If MEDS was not updated but the county system was, then there is a county system or procedure problem that needs to be resolved.

If the Medi-Cal SB87 redetermination has not been completed, complete the process (refer to ACWDL 01-36 and any subsequent related ACWDLs). After completing this process, verify that the county system has updated MEDS appropriately so that the aid code 38 on MEDS is either overlaid or terminated.

9532 OVER 3 EDWARDS MONTHS - MEDI-CAL DETERMINATION OVERDUE

This alert is a reminder to counties to do an SB87 Medi-Cal redetermination on a discontinued county administered cash-linked client (aid code 38). The redetermination must be completed prior to the next timely notice of action (NOA) cutoff date.

Alert 9532 is generated when a client has more than three months of ongoing continuous eligibility to Medi-Cal in aid code 38.

This alert indicates:

- o the county has not yet completed the SB87 Medi-Cal redetermination; or
- The county did not successfully update MEDS on the outcome of the SB87 redetermination.

To correct:

If the SB87 Medi-Cal redetermination was already completed, check MEDS records, prior MEDS alerts (INWA and/or county file), the county records, and prior county updates sent to MEDS for the source of the conflict or problem. If the SB87 disposition update was rejected, resolve the problem identified in the original alert message and then verify that an update from the county system has either overlaid or terminated the aid code 38 eligibility. If necessary, submit a MEDS online transaction to report the information from the SB87 disposition. If MEDS was not updated but the county system was, then there is a county system or procedure problem that needs to be resolved.

If the Medi-Cal SB87 redetermination has not been completed, complete the process (refer to ACWDL 01-36 and any subsequent related ACWDLs). After completing this process, verify that the county system has updated MEDS appropriately so that the aid code 38 on MEDS is either overlaid or terminated.

9535 DEEMED NEWBORN OVER 11 MONTHS, REDETERMINATION NEEDED

This alert is generated by the MEDS Renewal process to notify the county when an infant presumed deemed eligible through the online Gateway enrollment process is approaching one year of age.

ACTION: The county must take the required follow-up action to prevent the deemed eligibility status from continuing beyond the infant's first birthday. For more details see ACWDL #05-02.

9543 SPECIAL PROGRAM AID CODE INCOMPATIBLE WITH PRIMARY ELIG

The recipient shows eligibility on MEDS for the Personal Care Services Program (PCSP) in a special program segment and Long Term Care eligibility in the primary program segment. These two types of simultaneous eligibility are incompatible.

Two of these alerts are generated: one for the primary segment and one for the PCSP special program segment.

To correct:

Review the eligibility and determine which eligibility is correct. Update your county system and MEDS as appropriate per your county procedures.

9546 OVER 2 MONTHS ACCEL ENROLL - APP DETERMINATION OVERDUE

This alert is generated when a client has been eligible on MEDS in an accelerated enrollment aid code for more than 2 months and the application process has not been completed or MEDS has not been successfully updated with the outcome of the application process. This is a reminder to county staff that the application process has not been completed in the expected timeframe.

To correct:

If the application was processed, check the MEDS record, prior MEDS worker alerts (INWA and/or county file), the county records, and the prior county updates sent to MEDS to determine the source of the problem. If MEDS rejected the application disposition, resolve the problem identified in the original alert message and then verify that an update from the county system has terminated the accelerated enrollment eligibility.

If the CIN and/or MEDS-ID from the accelerated enrollment record was not entered into the county system when the application was processed, a second accelerated record on MEDS may exist for this client. If so, use existing procedures for chaining duplicate recordsIf the eligibility disposition was never sent to MEDS, there is a county system or procedure problem that needs to be resolved.

If the application has not been processed, complete the application process and then verify that an update from the county system has terminated the accelerated enrollment eligibility on MEDS.

If the accelerated enrollment aid code indicates the application was filed at Single Point of Entry (SPE) and you have not received a copy of the application, contact SPE immediately to obtain a copy of the application. Complete the application process and then verify that an update from the county system has terminated the accelerated enrollment eligibility.

9548 OVER 2 MONTHS EXTENDED ELIG - MEDI-CAL DETERM OVERDUE

This alert is generated when a client previously Medi-Cal eligible in a category not administered by counties (e.g., former SSI/SSP) has been in an extended eligible status pending county completion of an SB87 Medi-Cal redetermination process for more than 2 months.

To correct:

If the SB87 Medi-Cal redetermination process was already completed, determine why MEDS was not updated (check INWA and county system updates sent to MEDS) and submit MEDS updates as appropriate so that MEDS will terminate the extended eligibility.

If the SB87 Medi-Cal redetermination process has not yet been completed, complete the SB87 Medi-Cal redetermination process (refer to ACWDL 03-24 and any subsequent related ACWDLs). Once the process is completed, verify that the county system has updated MEDS appropriately so that MEDS will terminate the extended eligibility.

9550 ONGOING BURMAN ELIGIBLE - MEDS ELIGIBILITY UPDATE OVERDUE

This alert is generated:

- when a beneficiary has been placed in a forced eligible status from a MEDS hold for more than 1 month; and
- the county has not yet taken action to resolve the problem that generated the MEDS hold:

A forced eligibility status indicates that MEDS is continuing the questionable eligibility on MEDS until a pending county update is processed to report the correct current eligibility.

To correct:

Check prior worker alerts to determine why the MEDS record was placed in a hold status. Resolution of the eligibility status will vary depending on what alert caused the MEDS hold.

Did the client exceed the allowed age for an aid category and the eligibility redetermination was not reevaluated?

Did the eligibility update reject due to a file clearance problem and the associated alert was not worked?

Were duplicate sets of eligibility reported to MEDS on the county reconciliation file and the associated alert was not worked?

Resolve the problem identified in the original alert message and then verify that an update from the county system has either overlaid or terminated the exception eligible status or, if necessary, submit a MEDS online transaction to resolve the problem and report the information from the rejected transaction.

MEDS TRANSACTIONS

As CalWIN interfaces with MEDS, there are certain transactions initiated in CalWIN and sent to MEDS, which in turn trigger an action in MEDS. The following MEDS transactions are generated from CalWIN

- 1. AP18 Report New Applicant or New Applicant for Existing Client (formerly AP20), & Trigger IEVS
- 2. EW05 Change Medi-Cal/ CMSP County Of Responsibility (Medi-Cal & GA)
- 3. EW10 Social Security Number Change
- 4. EW12 Update Client non-eligibility Information
- 5. EW20 Add New Client Record/ Add or Update Client Eligibility (Medi-Cal & GA)
- 6. EW25 Update Case Level Information
- 7. AP34 Add or Update Application Data For Existing MEDS Client
- 8. EW40 Termination/Hold Status Change (Medi-Cal & GA)
- 9. EW45 Request Replacement Beneficiary Identification Card
- 10. FX05 Change Food Stamp County Of Responsibility
- 11. FX20 Add New Client Record/ Add or Update Client Eligibility for Food Stamp
- 12. FX40 Termination/Hold Status Change for Food Stamp
- 13. FX60 36-Month Food Stamp ABAWD Code Update
- 14. HA20 Report Homeless Assistance Payment
- 15. HI37 Report Private Health Insurance Information
- 16. HI40 Report Third Party Liability Reporting

The following table lists these transactions and additionally provides trigger conditions, field names and screen names to serve as navigation for each action.

Transaction	Trigger Condition	Field Name	Screen Name
AP18	New Application for existing client	All Fields	Collect Household Member Details
AP18	Report New Applicant	Generate New CIN, Generate New CWIN	Clear Individual Through CWIN
EW05	ICT Client is authorized for the first time for Medi-Cal or GA	Authorize (appropriate program)	Authorize Eligibility Program Benefit
EW10	SSN is changed	SSN	Collect Individual Demographic Summary
EW12	Client Ethnicity is changed	Ethnicity	Collect Individual Demographics Detail – Demographics Detail Tab
EW12	Client's Language is changed	Language	Collect Individual Demographics Detail – Demographics Detail Tab
EW12	Client's Home Phone is changed	Home Phone	Collect Individual Demographics Detail – Demographics Detail Tab
EW12	Client's Work Phone is changed	Work Phone	Collect Individual Demographics Detail – Demographics Detail Tab
EW12	Client's Message Phone is changed	Message Phone	Collect Individual Demographics Detail – Demographics Detail Tab
EW12	Client's U.S. citizenship changed	U.S. Citizen Y/N	Collect Individual Demographics Detail – Demographics Detail Tab

Transaction	Trigger Condition	Field Name	Screen Name
EW12	Client's Name is	First Name, Last	Collect Individual Demographics Detail –
E///40	changed	Name	Demographics Detail Tab
EW12	Client's DOB is	Birth Information –	Collect Individual Demographics Detail –
	changed	Place, State, Date, City, Verification,	Demographics Detail Tab
		Source	
EW12	Client's Death	Death Information –	Collect Individual Demographics Detail –
	Information is changed	Date, County,	Demographics Detail Tab
		Verification, Source	0 ,
EW12	Client's Home Address	Delivery Address,	Maintain Address
	is changed	Number, Street	
E14/40	OF G NA TE	Name	M. C. A.I.
EW12	Client's Mailing	Delivery Address,	Maintain Address
	Address is changed	Number, Street Name	
EW12	Client's Alien/Refugee	Status	Collect Non-Citizen Detail
L V V 1 Z	Status is changed	Otatas	Condit Non Citizen Betain
EW12	Client's INS Entry Date	ORR Letter/Entry	Collect Non-Citizen Detail
	is changed	Date	
EW12	Client's Country of	Country of Origin	Collect Non-Citizen Detail
	Origin is changed		
EW12	Client's Country of	Country of Origin	Collect Non-Citizen Detail
EW12	Origin is added	Status	Collect Non-Citizen Detail
	Client's Alien/Refugee Status is added	Sidius	Collect Non-Citizen Detail
EW12	Client's INS Entry Date	ORR Letter/Entry	Collect Non-Citizen Detail
	is added	Date	
EW12	Client's Name is an	Alias Name –	Collect Individual Aliases Detail
	SSA Alias Name	Effective Begin	
		Date, Effective End	
		Date, Last, First,	
		SSA Alias Name	
EW12	Client's Existing Name	Alias Name –	Collect Individual Aliases Detail
	is changed to SSA	Effective Begin Date,	Sollost marvidual / ilidoso Botali
	Alias Name	Effective End Date,	
		Last, First, SSA Alias	
EW12	Confidential Special	Name [Y/N] Type of Special	Collect Individual Aliases Detail
_ V V I Z	Indicator is added to	Indicator	Concot marriada / mases Detail
	client's case		
EW12	Client's representative	Туре	Collect Authorized Representative Detail
	type changes		·
EW20	Client is authorized for	Authorize	Authorize Eligibility Program Benefit
	the first time or when	(appropriate	
	an eligibility change is	program)	
	authorized for Medi-		
	Cal or GA	ATTACHMENT D	37

Transaction	Trigger Condition	Field Name	Screen Name
EW25	Case Address is changed	Address	Collect Individual Address Detail
EW25	Case Mailing Address is changed	Address	Collect Individual Address Detail
EW25	Case Worker is changed	Suggest User	Manage Case Assignment
EW25	Case Name is changed	Case Name – First, Last	Collect Case Summary Detail – Case Information Tab
AP34	Client's eligibility is denied for Medi-Cal, Food Stamp, or GA	Run EDBC, Authorize	Authorize Eligibility Program Benefit
EW40	Client's discontinuance is authorized for Medi-Cal or GA	Discontinuance Date, Authorize (appropriate program)	Authorize Eligibility Program Benefit
EW45	When Individual requests replacement of Medi-Cal card	All fields	Maintain Card Request
FX05	ICT Client is authorized for the first time for Food Stamp	Authorize (appropriate program)	Authorize Eligibility Program Benefit
FX20	Client is authorized for the first time or when an eligibility change is authorized for Food Stamp	Authorize (appropriate program)	Authorize Eligibility Program Benefit
FX40	Client's discontinuance is authorized for Food Stamp	Discontinuance Date, Authorize (appropriate program)	Authorize Eligibility Program Benefit
FX60	When Time Clock Begin or end date is changed or New Clock period is entered for ABAWD	Clock Type, Clock Begin Date, Clock End Date	Collect Individual Time Clock Detail
HA20	When Homeless Assistance benefits are authorized.	Authorize (appropriate program)	Authorize Eligibility Program Benefit
HI37	When an Individual is added from a Health Insurance Policy	Insured Individuals Button - Delete	Collect Health Care Coverage Detail
HI40	When Third Party Liability is added	All fields	Collect Third Party Liability Detail

The following transactions are created only as part of MEDS Recon:

Transaction	Trigger Condition	Field Name	Screen Name
RC20	Generated for every eligible Medi- Cal or GA recipient as of the day the Recon job is run.	N/A	N/A
FR20	Generated for every eligible Food Stamp recipient as of the day the Recon job is run.	N/A	N/A

Additional Notes:

- Triggers for EW10, EW12 and EW25 transactions are not processed in CalWIN if the trigger is generated on a discrepant case. Once the case is made non-discrepant, all the triggers are processed and the transactions are sent to MEDS.
- 2. Individual level MEDS transactions are sent only if the individual has Requesting Assistance = "Y" checked on the "Collect Household Members Detail" screen in the Application Registration subsystem or "Collect Case Individual Detail" screen in the Data Collection subsystem of the application. This logic applies to the following transactions only:
 - a. AP18
 - b. EW10
 - c. EW12
 - d. AP34
 - e. EW45
 - f. FX60
 - g. HI37
 - h. HI40

Attachment #2

Transactions sent to MEDS for Intake and Ongoing

The number of transactions generated depends on the case's status **intake** or **ongoing** case.

Intake

Whenever an intake application is approved the transactions that are sent to MEDS are as follows:

Transactions are sent to MEDS for the month of application and one for each subsequent month until the point of two future months.

Example:

Mary Jones and her two children came in to apply for benefits on July 1st . The worker processed the application, and ran EDBC. CalWIN EDBC and determined benefits for the months of July, August and September. On August 2nd, the worker authorizes the benefits determined by CalWIN for all months. CalWIN will generate MEDS transactions for all the months that were authorized.

When the worker views the CalWIN MEDS send file the transactions for the client and her two children will consist of a transaction for each month that was authorized with a termination date for each month and a termination reason of 99 until the future month. This occurs to tell MEDS that each month is a closed period of eligibility until the future month. This results in a termination date (last day of current month and a termination reason code 99 to be displayed on MEDS (See screen on next page)

Month	Begin Date	End Date
July	July 1st	July 31st (closed period transaction)
August	August 1st	August 31st
September	September 1st	September 31st
October	October 1st	No end date (open end transaction)

September and October are the future months in this situation and will be reflected in MEDS under the Pending column respectively, when MEDS Renewal occurs. **The pending eligibility information is displayed on the MEDS INQ4 screen** (see screen print on next page).

Note: The September and October transactions will be pended, but if eligibility is re-determined by CalWIN for these months, new transactions will be generated from CalWIN.

Attachment #2 (continued)

```
** PRIMARY MEDI-CAL/CMSP INFORMATION ** DAG - 08/16/05
     INOM
                                                                  09:15:13
                                                            , MARY
CASE-NAME JONES, MARY
                              DISTRICT
                                               JONES
COUNTY-ID 37-3N-1B11111-0-02 EW-CODE EMDE
MEDS-ID 6XX-XX-XXX8 SSN-VER J REDET-DT 08-05 XXXXXXXXXX
BIRTHDATE 09-30-1981 DOB-VER C SEX F GOV-RSP 1 XXXXXXXX
                                                                  CA 92101
CHAINED-ID LAST-MC/CP-CHG 08-15-05 ADDRESS-FLAG W RES-COUNTY 49 PRIOR-MEDS-ID 8XXXXXXXXX LAST-OTH-CHG 08-15-92 APDP PICKLE RECOVERY
WELFARE-PGM 007 DEATH-DT DEATH-CD TERM-DT 08-31-05 TERM-REAS 99
CIN 9XXXXXXXX 9 HIC-NO
                         BIC-ISSUE 08-15-05 PAPER-ISSUE 2 3 FS
PGM: M CP
                 2005=====> 2004=====>>
       08-05 PEND JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC
COUNTY 37 37
AID-CODE 3N 3N
                                                37
                                                 3N
ELIG-STAT 001 001
                                                002
SOC-AMT
CERT-DAY
OHC
RESTRICT
MEDICARE
HCP1-NUM
OPTION __ <F13=VALID OPTIONS> F3=SUMMARY; F7=BACK; F8=FORWARD; ENTER=RETURN
```

INQ4 ** P	ENDING MEDI-CAL/CMSP	INFORMATION **	DAG - 08/16/05 09:19:25
MARY	, JONES	MEDS-CUR-MMYY (8-05
MEDS-ID 6XXXXXXXXXX SSI			
CHAINED-ID	LAST-MC/CP-CHG 08-15	-05 LAST-OTH-CHG 08	3-15-92
PGM: M CP 1	— — — — — — — — — — — — — — — — — — —	3 E	
	=== MEDI-CAL/CMSP IN	FORMATION ======	
CASE-NAME JONES, MARY	DISTRICT	REDET-DT 08-05	ELIG-STAT 001
COUNTY-ID 37-3N-1B1111:	1-0-02 EW-CODE EMDI	E TERM-DT	TERM-REAS
SOC-AMT			
	= SPECIAL PROGRAM 1	INFORMATION =====	
CASE-NAME	DISTRICT	REDET-DT	ELIG-STAT
COUNTY-ID	EW-CODE	TERM-DT	TERM-REAS
	= SPECIAL PROGRAM 2	INFORMATION =====	
CASE-NAME	DISTRICT	REDET-DT	ELIG-STAT
COUNTY-ID	EW-CODE	TERM-DT	TERM-REAS
	= SPECIAL PROGRAM 3	INFORMATION =====	
	DISTRICT	REDET-DT	ELIG-STAT
CASE-NAME			

Attachment #2 (continued)

Ongoing

Whenever an ongoing case is authorized, CalWIN will determine if the new benefits are different than the last authorized benefits. If there is a difference CalWIN will create transactions.

The number of transactions will depend on how many months the user selects to run EDBC and authorize. At a minimum the transactions would be for current month and future month. If EDBC and authorization occur after the ten day Notice, the month following the future month will also be included.

Worker selects EDBC to be executed for current month of July and future month of August.

Month	Begin Date	End Date
July	July 1st	July 31st (closed period transaction)
August	August 1st	No end date (open end transaction)

August is the future month in this situation and will be reflected in MEDS under the Pending column until MEDS Renewal occurs.

Attachment #3

Researching and Resolving File Clearance Alerts

A file clearance alert usually points to a MEDS-ID conflict or an incorrect MEDS-ID in CalWIN and resolution is simply a matter of correcting the MEDS-ID. If this simple fix does not resolve the problem, then more research will be required. The various circumstances noted below can also be applied to fixing file clearance alerts with the research and actions necessary to resolve the problem.

If a file clearance alert points to a County ID versus MEDS-ID conflict or a CIN versus MEDS-ID conflict, first determine if there are two MEDS records involved in the conflict.

Do a MEDS online inquiry using the MEDS-ID from your transaction and if a MEDS record is found, then two different MEDS records will need to be considered in resolving this conflict. Whether one or two MEDS records are involved, be sure to verify that information on two different individuals was not linked to a single MEDS record.

The Client Identification on the Transaction Points to Two Different MEDS Records

First determine if the two different MEDS records actually belong to the individual sent by CalWIN. If they do belong to the same individual then combine the records through a MEDS on-line request. If they do not belong to the same individual, determine what client identification information reported on the transaction belongs to the other individual on MEDS and what needs to be done to rectify both records.

Determining Whether a MEDS Record Belongs to the Individual on the Transaction

Use the MEDS Name Cross Reference (checking for different names), Case Inquiry and Address Inquiry (checking the family composition).

- Is the MEDS record for the same individual as was reported on the CalWIN transaction?
- Has information on two different individuals been linked to a single MEDS record?
- If information for two different clients has been linked to a single MEDS record, contact the MEDS coordinator.

The Transaction County ID Points to A MEDS Record for a Different Individual

If the transaction County ID belongs to another individual, assign a new County ID to your client. If the county system does not allow a different person number to be assigned to the client, then close the existing case and open a new case in order to get a usable County ID for the client.

The Transaction MEDS-ID Belongs To A MEDS Record for a Different Individual

Check to see if the Social Security Number (SSN) or the pseudo MEDS-ID was entered into CalWIN incorrectly. If the MEDS-ID in the CalWIN transaction is an SSN, check the case records and verify if the SSN is legitimate. Also, check the SSN verification code on the MEDS record to determine if the Social Security Administration (SSA) validated the SSN for this individual. If the SSN on the county transaction is incorrect, correct the SSN on the county local system. If the SSN does belong to your client and the other person is also a client in your county, update the local county system to correct or remove the incorrect SSN from that client's record. If the client is currently active, the changes should trigger a removal of your client's SSN from that client's MEDS record. If the change does not trigger the removal, do a MEDS online transaction to correct or remove the SSN. If the other person is under the responsibility of another county and the SSN on their record belongs to your client, contact the MEDS Coordinator or MEDS Liaison to request that the responsible county or other entity (e.g. Healthy Families) to remove the SSN from that client's MEDS record. If the other county/entity does not correct their record, contact the MEDS Liason for assistance.

The Transaction CIN Points to A MEDS Record for a Different Individual

This indicates that an inappropriate CIN was selected during file clearance. Delete the inappropriate CIN from the case record on CalWIN. This will involve taking the case file to Intake Support so they can correct the record. Add the client into the case with the newly selected/assigned CIN to establish ongoing eligibility reporting between your local system and MEDS for that individual. Contact the MEDS Coordinator/MEDS Liaison to have the MEDS records corrected at the State.

The Transaction MEDS-ID Does Not Match MEDS and is Not Known To MEDS

First establish that the individual in the MEDS record is the same individual reported in the county transaction and then determine what record has the correct MEDS-ID. If the MEDS-ID in the transaction reported to MEDS is an SSN and the MEDS-ID in MEDS is a pseudo-ID, submit a MEDS online transaction to the MEDS Operator to report the SSN to MEDS. Be sure to verify that the SSN or pseudo-ID in your local county system is correct. If incorrect, correct the SSN in your local system. If the MEDS-ID in the transaction is an SSN, check the county case records to determine if the SSN is valid. Check the SSN verification code on the MEDS record to determine if the SSN on MEDS failed SSA validation check. If the SSN on your transaction is incorrect, correct the SSN on the local system. If the SSN on MEDS is incorrect, following existing procedures for resolving MEDS related issues.

The Transaction Birth Date Does Not Match MEDS

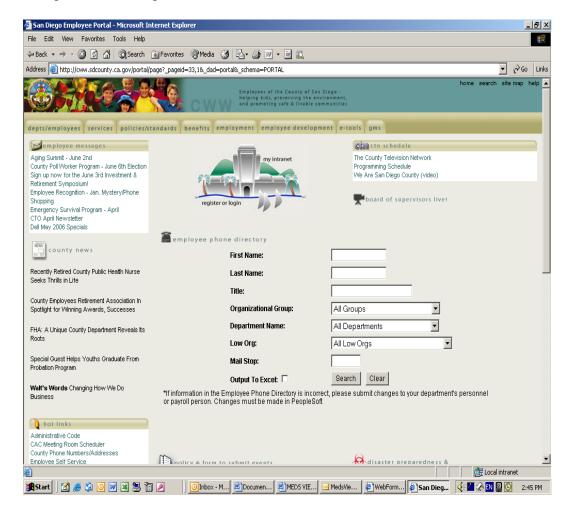
First establish that the individual in the MEDS record is the same individual reported in the CalWIN transaction and then determine which record has the correct birth date. Verify if the birth date in the local county system is correct and if incorrect, correct it. Check the county case records and verify the birth date documentation and the birth date verification code on the MEDS record to determine if the MEDS birth date was verified. Contact the client, if validation of the correct birth date remains unclear. If the birth date on the local system is correct, following existing procedures for resolving MEDS related issues.

COUNTY OF SAN DIEGO ONLINE DISPLAY OF MEDS TRANSACTIONS

(aka MEDS Data Dump)

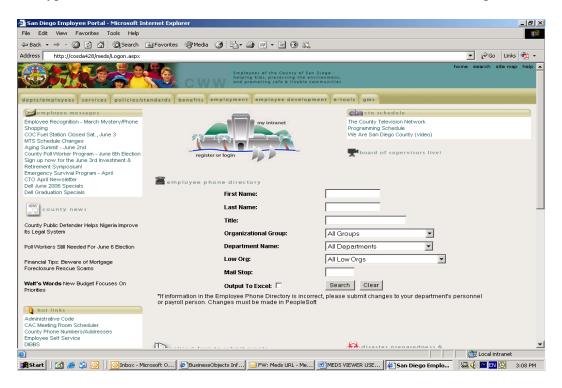
<u>PURPOSE</u>: The function of this website is to display all MEDS transactions (i.e. all IEVS, SAVE, HAPI, MEDS, and CDB transactions that have been sent to MEDS from CalWIN. (Replaces WMDC & WMDS screens/CDS813 Report). Eligibility and Support staff can utilize this tool during analysis & troubleshooting of MEDS problems to determine whether or not the correct MEDS/CDB transactions are sent from CalWIN to MEDS.

1. Open Internet Explorer:

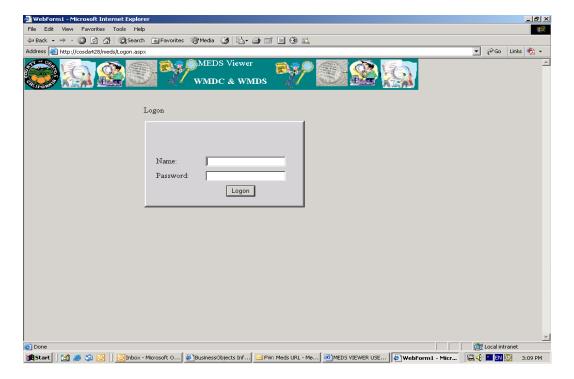


Subject: Online Display of MEDS Transactions

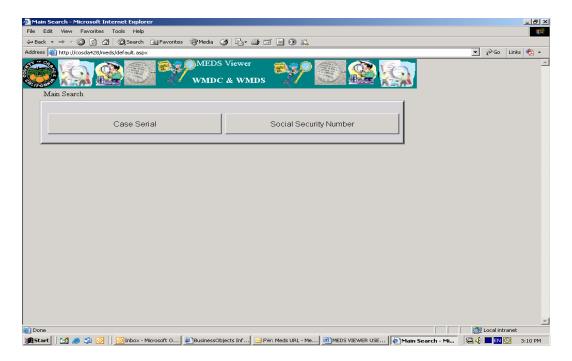
2. Type in http://cosda428/meds/Logon.aspx in the address bar and click on <go>



3. Type in Meds for Name and Password and click on <Logon>

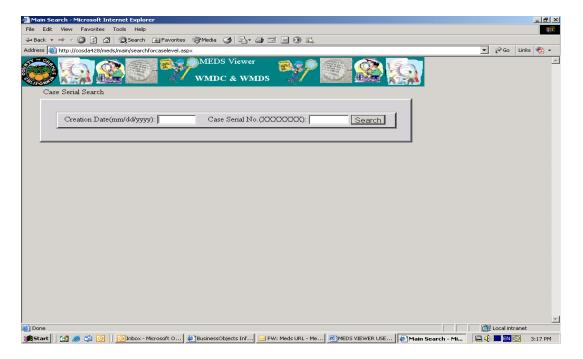


4. Main search of application will open up. You can do searches either by Social Security Number or Case Serial number. If you would like to do a search using Case Serial number, click on Case Serial button



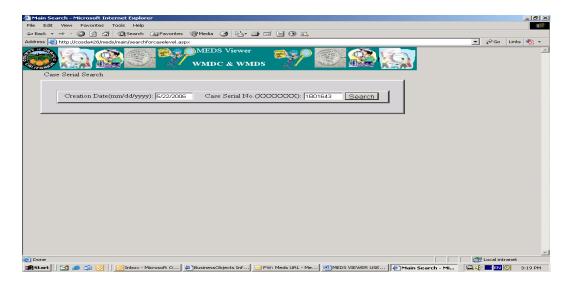
Note: For ease of future use, you may want to create a desktop shortcut to this application.

5. Case Serial Search screen will open up

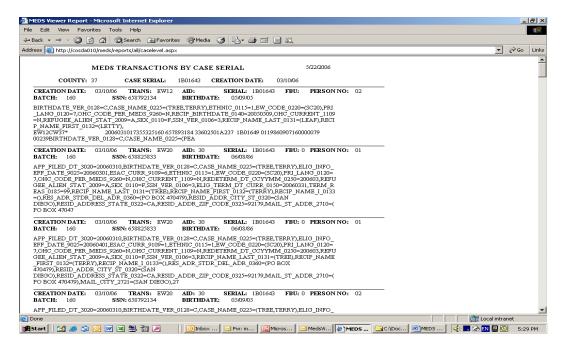


Subject: Online Display of MEDS Transactions

6. Fill in Creation Date and Case Serial Number and click on <search>

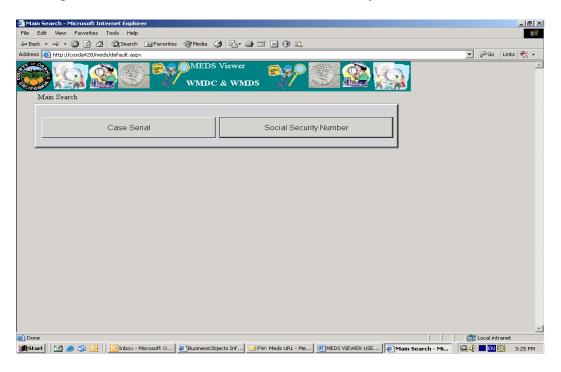


7. The application will produce all the transactions for the requested case number from the creation date entered to present – see MEDS Manual Appendix B (https://www.ext.dhs.ca.gov/) for detailed descriptions of each data element.

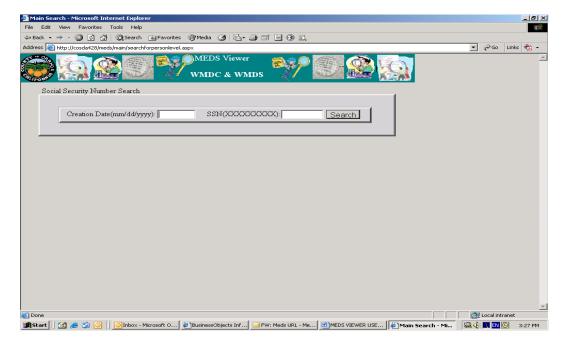


<u>Note</u>: Transactions for the case are displayed in chronological order beginning with the requested creation date and within the date will be listed alphabetically, i.e. AP20, EW30, FX10. To view transactions from a prior date, enter the oldest date in the input field and press <search>. Transaction data will be stored for a maximum of 30 calendar days from date of creation.

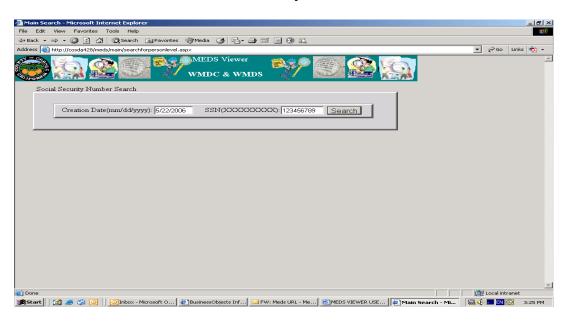
8. If you would like to do a search using Social Security Number, return to the Main Search page by clicking on
 button, then click on Social Security Number button.



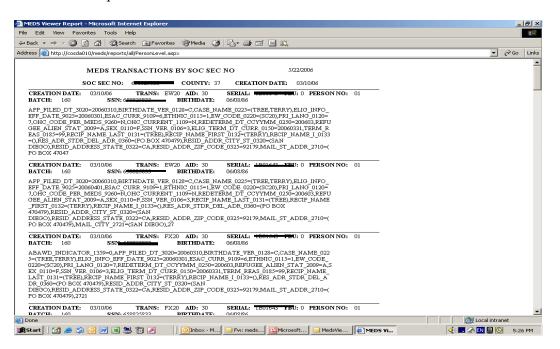
9. Social Security Number Search screen will open up



10. Fill in Creation Date and Social Security Number and click on <search>



11. The application will produce all the transactions for the requested Social Security Number from the creation date entered to present - see MEDS Manual Appendix B (https://www.ext.dhs.ca.gov/) for detailed descriptions of each data element.



<u>Note</u>: Transactions for the SSN are displayed in chronological order beginning with the requested creation date and within the date will be listed alphabetically, i.e. AP20, EW30, FX10. To view transactions from a prior date, enter the oldest date in the input field and press <search>. Transaction data will be stored for a maximum of 30 calendar days from date of creation.